1792

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1 Woodside Terrace,
Glasgow

This book was one of
several which were sent to
my father from the library
of Dr. Cleghorn as a present
for attending him on his
death-bed. It is entirely
in Dr. Cleghorn's hand writing
– was not intended for
publication. –
It is now deposited in
the library of the Faculty
of Physicians & Surgeons as
a curious relic of the
olden time. –
Eben Watson
Apl 1882

Glasgow Novr. 29th 1792 We opened the body of Robert M'Lintock at 64. - He had been a very stout active man, & remarkably free from complaints till a few months ago, when he was seized suddenly with sickness which ended in the vomiting of a black matter. His stools also were black. By bleeding & acids this attack was overcome so far that he went out & did business; but he gained no strength & his complexion grew more & more yellow. at last he was confined. His vomiting returned with increased severity. Every thing he hafsed either upwards or downwards had an intolerable smell. He had long felt a heavy pain along the Cartilages of the left side, & stretching over the epigastrick region. a hardness was distinctly

felt.

felt in those parts for the removal of which mercurial friction was tried in vain after a variety of long continued suffering he died.

After death he appeared much emaciated & his belly felt more flaccid than it had done during life.

On opening it we found the Liver harder & whiter than ordinary, but not much larger.

The omentum was so much diseased that it can hardly be described. The lower part was shriveld & destitute of fat. It ended in a point about the breadth of an inch, & this point was firmly attached to a hard body lying in the middle of the small intestines. This was a schirous mesenterick gland, filled with calcareous earth.

The upper part of the omentum was thick, hard & black. Above, it adhered to the peritoneum lining the abdominal muscles; below, to the arch of the Colon. The Colon adhered to the stomach, with which it communicated by a pretty large hole. For several inches the coats of the gut were thickened but so tender that they broke on the slightest touch & the whole were of a black colour.

The upper surface of the stomach was glued to the concavity of the liver. Upon separating this adhesion, the surface of the liver appeard mortified for more than a handbreadth. The mortification reached to the depth of one or two inches, & at the bottom were seen some collections of pus.

Almost every part of the stomach was mor-
-bified or schirrous. Several tumours sur-
-rounded each orifice; & one larger than
a walnut shut up the pylorus almost
compleatly. The whole portion adhering to
the Colon was hard & black, but so
tender that we could scarcely handle
it without rupture. At this part, the
inside looked like a number of little
pits full of glaing black matter of
a very bad smell.

The great arch of the stomach
was less affected with schirrus than
any other part, but it was prodigiously
distended with matter similar to that
which had been vomited. Stretching
upwards far above its natural po-
-sition, this part pressed on the dia

=phragm which seemd a little inflamd there. – Some other parts of the bowels were affected, but in a trifling degree compared to what has been mentiond.

Could the cough, which in the last illness was very troublesome, proceed from the pressure against the Diaphragm? – The communication between the stomach & Colon accounts for a fact that surprized us. Tho' the Patient ate well & had regular stools, he was not nourished. Even if the food had been properly digested, which certainly it was not, this must have happend, because it passed directly into the Colon where there are few absorbents, consequently little nourishment. I lost another Patient in this complaint Mrs Gardiner, but she was not opend.

6 Dr Wood supposes Typhus to proceed from an accumulation of hydrogen & carbone & a corresponding deficiency of oxygen – To every other medl he prefers nitre given thus. ℞ Nitri puri ℥ss solve in Aq. puraq ℥VII ad. Syrupi ℥I Spt Lavend. comp. ℥II M. cap ℥I or 2, omni 2da vel 3tia hora. –

This Father has used it for 30 years wd unexampled success & he has lost no patient since he began to employ it. The pamphlet is very ill written, but this is surely worth trying –

Glasgow May 20th. 1793 – Mr Farewell from Paisley consulted me about his son a 15 who 6 weeks ago had epilepsy – He has had 3 attacks without any known cause & looks dull – was bled yesterday – Ordered his head to be shaved & blistered – – Magnesia occasionally – & ℞ Flor Cham ℥VI. Rad Val. ℥ss Macis ℥I – Infs in Aq. bull. lbIV – sum. Cyath. M & o –

June 1st 1793. We opened Mrs Muir at. -
She was very fat & unwieldy, & had long complain
Her first complaints were frequent & violent
flooding, weakness & piles. - I saw her about a
month before her death, & found her belly very
much distended. her urine scanty, her thirst
great with much difficulty of breathing. All her
belly was uneasy, but the pain was parti-
cularly severe in the left hypochondrium, near
ly over the mouth of the stomach. The belly
when felt gave a singular sensation; & the
swelling seemed to be compounded of schir-
rus, wind & deep-seated water.

Her stomach rejected every kind of mede-
cine & food. Her breathing became more
& more laborious, till at length a fever came
on & put an end to her sufferings & her
life. -

After 24 hours we found her body un
commonly warm. Under the skin there lay
nearly

nearly 2 inches of fat.. On opening the abdomen there flowd out several pounds of fluid, of a brown colour & very greasy on the top. It seemd to have been containd chiefly in bags formd throughout the omentum which was universally diseasd. The colour was a blackish brown, particularly deep on that part where chiefly she had complaind. Its texture was completely destroyd below the umbilicus, where it was strangely coild up into a mass resembling putrid flesh & broken bags, of which some seemd to have containd pus, & others the fluid formerly described.

The stomach was much distended, & the intestines greatly discolourd - There were a few adhesions, but no other disease. The Rectum & kidneys were buried in fat. The uterus was large & scherrus, as were

the ovaria. The uterus contained some glandy
pus. -
Rem. This is the 2d case of omentitis that I
have opened. - The other was different from
this in several particulars. -

It may be distinguished from liver com
plaints by the feel & by the absence of those
symptoms which characterize the liver diseases.
No operation could have saved this patient,
The ordinary Trocar could not have reached
the fluid, owing to the uncommon thickness
of the fat, & if the whole water had been
drawn off, the putrid Omentum remain
ing must have proved fatal. -

Jan.y 5. 1794 Mr. M Lear opend John Murray
Hair dresser above the cross at about 60.
He was clean made & very active but for
some years had labour'd under very severe
cough accompanied with great dyspnoea &
occasional stitches. He continued to follow his
ordinary employment till very lately & found
himself much easier in his low shop than in
his house which is high. For some days
he passed a qty of blood by the anus & felt
a great increase of weakness from thence.
His lungs adhered to the pleura in
some places, & the colour was very gene-
rally a blue approacting to lurid. Through-
-out their substance a number of hard lumps
was felt, & the ramifications of the bronchia
seem'd universally either filled with mucus
or so compress'd by these hardnesses that

the air must have passed with difficulty.
The pericardium had some water & the inner
surface of the heart was rougher than usu-
al. – The lower part of the colon was
uncommonly pale, but no effusion vis-
cid could be discover'd. –

Remarks. The blood probably came from the
phlebitis of some vein near the anus wh.
prolapsed & swell'd often. The state of the
lungs accounted sufficiently for the diffi-
culty & noise of respiration, but what pro-
duced this state of the lungs? Was it inflam-
mation? – Did the blue colour arise from a
want of Oxygen? – Might not pure air or
vapour of myrrh have been tried here
to advantage? Mr. M'Leur supposed the diffi-
culty of breathing up stairs to be owing to
the diminish'd pressure of the air – Is this
conceivable? –

James Wilson æt. 17. 7 Months ago was seized wt. shivering - pain & swelling over the belly. Diarrhœa - P. quick - Belly loose - presc.d Camph.d Sol.n Opium - Diuretic infusion. & Gren. Tart -

Dr. Senter in the 1st Vol. of Philadelphia Transactions says: "One of the most valuable med.s in tuberculous phthisis is petroleum or rueleum. Finding that when joined wt. Tartar Emetic as ordered by Marjatt. it often purged, I joined it wt. Ipecacuan, when I can give it to vomit a phthisical patient tho' he have diarrhœa. I give 5 pills containing from 7 to 10 gr. of each, fasting & allow no drink to promote vomiting. If these produce 5 or 6 evacuations I repeat the same dose; if not, I increase the dose to six or more pills of the same kind. These vomits I repeat every

2d or 3d day according to circumstances, & in the mean time give as much as the stomach will bear of Dr Griffith's antiseptic, composd of Myrrh, Sal Martis & Sal Tartari; (what proportions?) & by these medecines more than by any other, have I cured consumption! - Memento. -

Blue vitriol is a safe vomit he says in all cases; the white is better for children.

Solway moss is a flat area about 7 miles in circumference. It's substance is a gross fluid composd of mud & 4d putrid fibres of heath diluted by internal springs wh rise in every part. The surface is a dry crust, covered with moss & rushes, offering a fair appearance over an unsound bottom - shaking under the least pressure. Cattle by instinct know & avoid it. Where rushes grow, the bottom is sound est. -

at the battle of Solway in the time of Henry
Oliver Sinclair was imprudently set over the
scotch army wh. had no confidence in him. A
total rout ensued; when an unfortunate troop
of horse driven by their fears, plunged into
this moss wh. instantly closed on them. A
man & horse in compleat armour lately dug
out are still preserved.

On the S. the moss is bounded by a
well inhabited plain, wh. thro' the space of
a mile declines gently ~~to the~~ Esk. This plain
is rather lower than the moss, being sep.d from
it by a breast-work form'd by digging heat,
making an irregular, low, herthend. line of
black boundary. This boundary gave way & ad-
mitted the moss over the plain between it &
the Esk.

On the 16th of November, 1771 in a dark
tempestous night, the inhabitants of the plain
were alarmed with a dreadful crash, which
they could in no way account for. Many of them were
then abroad in the fields, watching their cattle, lest
the Esk, which was rising violently in the storm

should carry them off. None of these miserable people could conceive the noise they heard to proceed from any cause, but the overflowing of the river in some shape, tho to them unaccountable. Such indeed, as lived near the source of the eruption, were sensible, that the noise came in a different direction; but were equally at a loss for the cause

In the mean time the enormous mass of fluid substance, which had burst from the moss, moved slowly on, spreading itself more and more, as it got possession of the plain. Some of the inhabitants, through the terror of the night, could plainly discover it advancing, like a moving hill. This was in fact the case; for the gush of mud carried before it through the first two or three hundred yards of its course, a part of the breastwork, which tho low was yet several feet in perpendicular height. But it soon deposited this solid mass; and became a heavy fluid. One house after another, it spread round - filled - and crushed into ruin; just giving time to the terrified inhabitants to escape. Scarce any thing was saved; except their lives; nothing of their furniture: few of their cattle. Some people were even surprized in their beds, and had the additional distress of flying naked for safety.

The morning light explained the cause of this amazing scene of terror and, shewed the calamity in its full extent: and yet, among all the conjectures of that dreadful night, the mischief which really happened, had never been supposed. Who could have imagined that a breast work, which had stood for ages, should give way? or that those subterraneous floods, which had been bedded in darkness since the memory of man, should burst from their black abode?

This dreadful inundation, tho the first shock it was the most tremendous, continued still spreading for many weeks, till it covered the whole plain – an area of five hundred acres; and, like molten metal poured into a mould, filled all the hollows, lying in some parts thirty or forty feet deep, reducing the whole to one level surface. The overplus found its way into the Esk; where its quantity was such, as to annoy the fish; no salmon, during ~~that~~ that season, venturing into the river. We were ashamed also, that many lumps of earth, which had floated out at sea, were taken up, some months after, at the Isle of Man —

Gold in Ireland - by the Countess of Mora -
The mountain is call'd Croghan (County of
Wicklow) is verdant to the top. It is insulated
with 3 streams or rivulets issuing from it, without
trees. Formerly it seems to have been wooded
& was the haunt of Wolves; for the Peasants
still say, "May the Wolves of Croghan eat you
up". It is 100 years since the last Wolf was
killed in Wicklow or Wexford, yet the ma
ledction exists.

Some think they have seen marks
of a Crater, which others deny. The soil is
good & thick, wt such verdure as to shew
a very long interval between the volcanick
& the present state. I have seen Gold from
Sumatra wt whole char, which I was in
formd yielded Gold. It is known that in
the course of the year several thousand pounds
worth were dug up. The gold was weighed

against Guineas. Some say it is alloyd, but this I dont believe.

Extract furnished by D. Stewart Esqr.

Extr. d'une lettre de Mr. le Prof Pictet de Genève le 16 Novr. 1795

Mr. le Baron de Humbolot savant Physicien & Naturaliste, dont j'ai eu le plaisir de faire dernierement la connoissance personelle a decouvert que dans les experiences de Galvani, les metaux n'etoient pas les seuls agens, mais que le carbone, entre' autres, jouoit le même role, & que le nerf etoit à cet egard un anthracoscope très fin; il faut decouvrir le carbone dans des substances, dans les quelles il est en minimum, dans certains schistes par exemple. Il a decouvert de plus, que quand la chaine ainsi formée Zn or ne donne aucune signe d'imitabilité le mouvement paroit à l'instant

ou l'on humecte le Zink avec l'haleine. Il croit que le Laiton gît dans le contact d'un fluide evaporable à la surface des metaux: & trouve, à l'appui de cette idée que l'experience reussit mieux quand les metaux sont chauffés, ou quand le fluide est très evaporable: il remarque encore qu'il y a dans toutes les experiences ordinaires disparité de calorique ou de temperature dans le metal, l'eau & l'air ambiant. Il rapporte les conjectures aux experiences par lesquelles Mr de Saussure a montré l'electricité produite par l'evaporation, et tantôt en plus, tantôt en moins, selon les circonstances. L'hypothese est ingenieuse, & n'est point destituée de probabilité.

Mr Leatten à Gottingen vient de faire sous les yeux de Lichtenbourg des experiences bien extraordinaires qu'il a publiées dans une brochure allemande. Il a trouvé par des experiences reiterées, qu'aucun metal sans en excepter le plomb & l'etain ne peut couler, ou

devenir fluide lorsqu'il est chauffé dans le gas oxigene. Le plomb s'oxide mais ne coule pas quoique violemment chauffé; ce n'est point l'oxide vitrifié qui le garantit & lui conserve sa fluidité; car en perçant la croute on trouve les lames de plomb ardentes, étincellantes, mais sures & sans fluidité. Mess.rs pretendent que ce n'est pas du calorique seul que depend l'etat de fluidité, qu'il faut encore incognitum quod qui se trouve dans tous les gas excepté le gas oxig.e. Le plomb, le fer meme coulerent dans le gas azote, le g. carbonique, le g. nitreux à une temperature très mediocre. La glace mise sous deux cloches dans l'air atmosphérique & le gas oxigene, exposée à la temperature d'un poele, eloit fondu dans l'air ordinaire lorsque celle dans le gas oxigene avoit à peine commencé à fondre un peu.

Ce sont des experiences à repeter, & je le ferai surement, mais il paroit que le grand phenomene de la fluidité n'est pas encore

bien eclairci, & que le calorique n'y agit pas seul. Nous voyons l'electricité latente dans la vapeur degagée au terme de la congelation. - Pourroit-on essayer la fusibilité des substances après les avoir desélectrisées? Comment y parvenir? Le pouvoir fluidifiant de l'électricité paroit si eminent dans les fusions froides qu'elle opere, qu'on ne peut s'empêcher de la croire un agent principal dans ces phenomenes. Voila Conjectures & a field for Exptts -

Mr de la Mark à faite une curieuse experience que Mr Lennebier a repeté avec succes. La plante nommée Arum maculatum a un organe connu sous le nom de Flava ou Mafleue. Lorsque cet organe se developpe, la chaleur interne de la plante croit de 7° (sept degrés) de Reaumur comparativement à l'air ambiant.

Tennant p. 335 - "Rasay contains some Basaltes, the most northern I am acquainted with; the last of 4 in the British dominions, all running from N. to S. nearly in a meridian; the Giant's Causeway appears first; Staffa succeeds; the rock Humbla about 20 Leagues farther & finally the column of Boris-mhaul: the depth of ocean in all probability conceals the lost links of this chain".

p. 303 - We proceeded along the shore heading upon another Giant's Causeway, every stone being regularly formed into a certain number of sides & angles, till in a short time we arrived at the mouth of a cave the most magnificent I suppose ever described by Travellers.

The mind can hardly form an idea more magnificent than such a space supported on each side by ranges of

columns, & roofd by the bottoms of those broke
off to form it; between the angles of wh. a
yellow stalagmitic matter has exuded, wh.
serves to define the angles precisely, & at
the same time vary the colour with a great
deal of elegance, & to render it still more
agreeable. The whole is lighted from with-
out, & the air being agitated by the flux
& reflux of the tides is perfectly dry &
salubrious wholesome, free entirely from
the damp vapours wt. wh. nat. caverns in ge-
neral abound.. Fingal's cave! -

Staffa lyes on the W of Mull; 3 leagues
N.E. from Iona; its greatest length an
English mile, its breadth half. Feet. I.
length of cave from the Rock wt. out 371. 6
from pitch of arch 250.
Breadth of do. at mouth 53. 7. at farther end 20. -
Height of arch at mouth 117. 6. at end 70
height of a pillar 58. - N.W. corner. outside 39. 6
Depth of water at the mouth 18. - bottom 9. -

Monday Octr 24th 1796 We opend the body of Mc Leod who was stabbed

There was a small scan near the cartilage between the 7th & 8th ribs, from which tho' nearly whole a quantity of pus opened when a probe was introduced.

We opend the belly first & found the bowels natural but very white & empty. The Liver was covered in several points (which seemd rough or indented) with pus, as was the stomach over a considerable portion of its upper surface where it adhered to the Liver. On separating the adhesions & wiping off the pus we discovered on the superior surface of the stomach & in the direction of the wound between the ribs, a small slit, which had divided the coats of the stomach except a few fi-

-bres

bres of the inner coat which yielded to the mere weight of the probe. A livid or black circle surrounded this slit on the inside.

We next examined the Diaphragm, in wh. we found a small hole communicating obliquely with that between the ribs. A quantity of pus oozed thro' this hole; the Diaphragm all round was thickened considerably & of the dark colour wh. usually remains after inflammation.

On opening the Chest we found a morbid bag stretching from the wounded Diaphragm along the edge & concave surface of the Lungs & pericardium. This bag ~~stretched~~ extended as far as the pericardium. Its inside was rough, red, & its coat was thick. It contained 10 ℥ of bloody serum.

-rum, which pressed backward against the Lungs & forward against the heart.

The pericardium contained a considerable quantity of water, & in the left cavity of the Thorax we found ℥15. The posterior part of the lowest lobe of the Lungs, was so-lid & black, evidently from the preceding inflammation.

When the external parts were dis-sected, there was a blackness for seve-ral inches all round.

Diamond - Mr Tennent deflagrating a small qty of Diamond wt a proportional qty of Nitre, in a Gold Tube, the acid was destroyd, & a mild alk: formed. This was dissolved in water, & lime wa-ter being added a Carbonate of Lime was pre-cipitated. This was decomposed by the Sulphuric ⊽, & the Carbonick ⊽ disengaged was found by Lavoi-sier's

ers Tables to contain precisely as much charcoal as the weight of the Diamond. Hence the Diamond appears to be pure Carbone. - This Exp was in part performed & the proper mode of conducting it pointed out by Morveau.

The diluted nitrous ether cures Lues & is said to have salivated in the E. Indies. -

The phosphate of ☿ is found useful both inwardly & outwardly

Mr Wm Findlay Dumbarton Jan.y 19th 1797 - Hyp. & Dyasp. Pill Ulom. 1 or 2 h.s. ☿. Peni mur. ℥ss. g.ts 15. 2da a-day

Dr Mc Leod's process for procuring alkali

Take Lime 50 - Sulphur 40 - Alk. sulph 100.

It failed with Dr Adair who found

1st The taste & appearance of the solution of Sulphur has always resembled those of the Sulphure of Lime, more than of alkali. On standing, there rose a crust of chalk & Sulphur.

The residuum of the filtre always consisted of sulphure of Lime with a large proportion of dark-coloured Gypsum

Sulphat of potash sometimes crystallized from the solution of sulphure; & on adding mur^ic^7 Sulphur was copiously prec^d & sulphureous hydrogen mixed with sulphureous^7 gas, rose.

On carbonating, a mixture of sulphur & chalk was copiously deposited; much sulphureo-hydrogen gas was extricated; but as the carbonation proceeded no alkaline taste could be perceived in the liquor. Carbonic & sulphureo-hydrogen were extricated by adding muriatic^7 -

It thus appears the process failed in both parts.
1st The alkaline sulphats were not decomposed.
Sulphure of Lime & alkaline sulphat still
continued.
2dly Little alk was obtained by carbonating.
Sulphur carbonate of Lime & sulfite of alkali
were obtained. So much lime was among the
sulphur that it could not continue to be used

Mem. de L'Acad. Vol. 1747. p. 34 -

Borrichius in the Trans. or Journals of Copenhagen, proposed to inflame oil of Turpentine by nitrous acid alone. He mentions it barely, so that not knowing the manipulations, many failed. Dispelius, Hoffman & Geoffroy succeeded in kindling this and other oils when they added concentrated vitriolick acid. Mr Rowelle made many fruitless trials, as I have often done, & at last succeeded. Once upon agitating the mixture with a rod, the flame burst out; immediately he concluded that this was all the secret, but agitation again failed. At length after many trials & much meditation, he found the inflammation always happend when a little nitrous acid was poured on the light spongy coal which rises during the effervescence.

The acid will do tho' not very strong, but it must be of such strength as to act whenever mixed with the oil at the freezing point.

He used 3 kinds of acid 1st (water being ℥j) ℥j., ℥iii, ʒii
& succeeded with all of 'em. 2 —— ℥iss — 12s.
Any oil will do, fresh or old. 3 —— ℥iss + ʒii
A little acid is poured on the charcoal, then if no flame appear, a little more when the charcoal has increased. — Beer-glasses or those like them are not proper. They are too narrow so that little surface is exposed to the air, & so shallow that a great portion is thrown out. For ℥j of each an old mahogany 7 or 8 inches diameter & 4 or 5 inches deep is of a proper size. ℥ss of each will be enough if the 2d acid be used. To succeed at once, the 3d ⊽ must be used, newly made & in greater qty. — The charcoal must be very dry at the moment of mixing wt the ⊽, now, when tho beat down it is generally moistened by the oil of Turpentine before coming into contact wt the ⊽: when the Expt succeeded, it was by means of the charcoal on the surface or along the sides of the vessel. —

Many essential oils were tried: that of Cedra & Lemon Juniper & Lavender. - Equal parts of the Cedra & the 3d. ℞ inflamed. - = parts were used, nay 5 to 7 of oil. Oil of Juniper wt. the 1st & 2d. made a kind of explosion & was thrown out; with the 3d. it inflamed. a strong ℞ in a hinderance to the inflammation here.

Ol. Lavd. was inflamed by the 2d & 3d. but not by the 1st. - Turpentine effervesced with red, not white vapours, & formed a mossy substance, but did not inflame, except when the strong ⊖ ℞ was added. - Linseed. oil inflames with the 2d. when used in great qty or found on at diffnt times. ℥1 ℞ to ℥ss of ol. formed a coal wh. inflamed by a few drops of nitrous ℞. ℥ss of olt. ℞ produced the same effect.

Ol. Succum produced no effect with the 1st ℞ very little with the 2d ℞ till to ℥ss of each, was added ℥ss of olt ℞: then the charcoal was formed & inflamed as usual. - Very strong nitrous ℞ did the same in large quantity.

bel of Cloves (oillet) was affected in the same way. - bel of hemp (chenevis) inflames very readily wt. the 2d. or 3d. 7 (indeed more uniformly than almost any other).

Ol. Olivar. - Amygdal. dul. oil of Rape, & Fêne were tried with nearly equal result. = parts, double, or triple the acid made very little difference. at first there was little action; after a minute it increased with some bubbles, effervescence, & nitrous gas, but not white vapours, & no charcoal: consequently no flame.

On adding the nitriolick 7 white vapours & charcoal are obtained, & flame may be produced, but it is dim & languid compared with the others. The best manner: ℥ss of 3d. nitl. 7 2d. of vitr. 7 are mixed & poured on ℥ss of oil: for an instant there is no action, afterwards it becomes violent. Then having ℥ss of nitl. 7, ⅓ is poured on the materials; their action increases: half the remainder is poured on, the charcoal rises

wt thick white vapour, & when the remainder is poured on the dry charcoal it takes fire. The intervals for pouring are short, momentanés mais sans precipitation. – Oil of Almonds swelled more & inflamed more vividly than oil of ol. –

Glauber & Dr Watson have both mentioned a kind of Grenades filled with these liquid fires, but cui bono?. –

From the Mly Mag. Augt 1797 Act of some things found in the last Eruption of Vesuvius 1794 when it overwhelmd Torre del Greco by Dr Thomson Naples.

Many things were found charred as, Bread, cloth, thread, wool, fishes &c. Stone by the sulphureous vapour was found changed into vrd tartar, with signs of fusion, sometimes crystallized in hexacotal prisms, terminated by hexagonal pyramids, at other times truncated.

Collections by Countess Sawronski, & Father Antonio dei petrizi –

1st. Glass changed into Reaumur's porcelain, radiated & having in crevices, siliceous crystals.

2dly Malleable Iron (window bars &c) increased in size 2ce or 3ce, brittle; its internal parts either crystallized in octoedral prisms, attractable by the magnet, or changed as it would seem thro' its whole substance, the outward parts being brittle & laminated like many ores, while the central part appeared to be pure iron in scales or grains, of a brilliant

silver

silver colour, without any of the azure found in the American specimens. This iron being granulated or laminated is brittle.

3d. The steel of a musket-lock is swollen & reduced to grains of a size rather large;

4th. The bells of some churches coverd with lava, have become soft & bent, & are completely coverd out- & in-side with a metallic crust, 2 or 3 lines thick, with signs of crystallization. Some crystals shoot 6 lines, & are pyramidal wth 4 rhomboidal faces. Small crystals like those of blend were discoverd on the crust in contact with the bell.

5. copper coin, & brass to have crystals & are brittle.

6 Gold coin has a black crust easily rubbed off -- probably from the contact of copper.

7 Some silver coin had melted. Sometimes copper coin was found attached.

8 Lead fused & running here become hard, some like litharge, others like minium, solid, compact & of the brightest colours.

A candle stick formerly brass was compleat-
ly changed: without, it exhibited a most bril-
liant crystallized surface; within, a surprizing
lustre, especially in the cavities, like groupes of
crystals of transparent blend of a coffee colour
& mixed with many octohedrons both of a bright
& a dirty red copper. May not the bright red of
some copper ores arise from a mixture of Iron?
The internal surface of the cavities appears
crystallized like that without, equally brilliant,
& sometimes radiated: altho' the external crystals
are entirely octacotals, on breaking a knob of
the Candle-stick, there appear in the centre wh.
resembles iron-slag, most beautiful cubes of
red copper which equal in brightness the finest
siberian specimens.

1798 June 7th Saw Mr Roberton Junr. from
Hamilton at 22 very stout - Studying Physick
By a voluntary effort he can stop the motion
of his heart so compleatly that the pulse
fails in both arms. In the space of 5 mi-

nutes he did so twice; once during 30
next during 37 seconds. His face became red
inclining to lived, whence I begged him to
desist, otherwise I believe he could have
continued it longer. It is not merely by
stopping respiration; besides that he makes
a particular effort, which seems to bear
down on the heart. He learned the secre
t of this power by accident, & might
by practice come I think to rival Col. Town
shend - from wh attempts however I dissuad
ed him. -

In the Trans. of the R. Irish Acad 1788
Mr Napier mentions that the Russian
Gun-powder is the strongest in Europe
tho' it's nitre be only twice refined &
contains a considerable qty of marine salt
& Mag.a - He thinks freq.t depuration may
separate a qty of elastic matter on the
presence of wh the strength of powder de

depends: a greater loss of weight occurs in the process than can be accounted for from the residuum, & less nitre being procured from damaged than from fresh ℞. — The best nitre is that which has shot slowly into crystals of mod.e size, solid, transparently white, wh. do not break crackling when moderately grasped, & wh. when ignited on a red-hot shovel do not decrepitate, but melt & inflame. — The charcoal wh. contains much alk. is the best, & the sulphur should be purified. — Proportions vary according to the ingredients. 3 lb Nitre: ℥8½ to 9½ Charcoal; ℥2¾ to 3¼ Sulphur. He found the dust (formed of crystallized nitre broken off) stronger than the grains, & new powder, broken down, gained strength. He thinks the small grained the best. In 1782 he found in the Magazines of Purfleet some barrels of (home made nitre) small grained powder from Chas. II.d well preserved —

Glazing reduces its strength $\frac{1}{3}$ or $\frac{1}{4}$. It keeps better however. The barrels should be lined often reversed — to obviate the effects of varying gravity. The powder ought to be dried very slowly — Salt of Tartar increases the report. Therefore (tho' it weakens the explosion, it might be added for parade. —

Dr. Hamilton made Expts. on Springs & in deep wells to ascertain the medm. temperature in Ireland. At a depth from 30 to 50 feet the greatest cold is a month after the vernal, & the greatest heat, a month after the autumnal Aequinox. At 80 feet, the monthly variations are not perceptible.

Medm. temp. of Londonderry taken in different parts of the town by max.m 1787 min.m 1788 — 47.6 to 49

Do. in Dublin 1788 — 50 to 52

Do. in Cork Do — 52.5 to 53.5.

In a letter from Boerhaave dated Decr 8th N.S. 1735
to the Countess of Forfar, respecting a case of Can-
cer, after recommending extirpation, or supposing
that impracticable, he adds. In this case there
will be only place for mitigating & palliating
the symptoms; stopping the spreading corruption,
& saving the blood-vessels.

For wch purpose I recommend the daily
use of Marshmallow flowers, red roses & El-
der infused in water (3 oz for a dose) taken
in the morning an hour before breakfast &
at 5 p. m. — As for external applica-
tions, the sore is to be dressed once in 8
hours, & washed of all its sharp matters, but
is to be touched with the greatest gentle-
ness & with the softest rags after the Lo-
tion wch is to be formed of the Liquor A.
Pledgets spread with the ointment B, & then
dipped in the Liquor A. are to be applied
over the whole sore. By these remedies
which from long experience I find the best

I hope the dreadful symptoms may be pre-
vented & the disease wch cannot be cured,
may be rendered tolerable.

As for the other management, I will not
say any thing, it being needless to tell my
friend wt is ye common practice, wherefore
allow me only to add that I desire I may
still preserve a place in yr friendship,
were it but the lowest.

℞

Take of R. Alum ℥ii Elder water lib ii
filter thro' gray paper, then add of
Elder Vinegar ℥i - Spt. Matricalis ℥ii.

℞.

Take of Ung nutritum ℥i - Of pop-
lar Oint.t ℥ss - Pomatum ℥ii - White
Lead washed ℥ss M ft. Ung -

Sir G Staunton V. 2. p. 249 gives a curious account of Chinese Physicians. The Colao had severe rheumatism in in the Back, arms & legs. There was besides a large painful tumor in the groin (a hernia) The Patient was surprized at the number of questions but by D Gillan, for the Chinese judge of every thing, by the pulses in which they pretend to have great skill. According to them, every part has a particular pulse wh indicates what part of the system suffers. Thinking this the general interpreter of every thing in health & disease, they judged every question unnecessary. After a full examination of the Colao's pulses, they had very early decided, that the whole of his complaints were owing to a malignant vapour or spt. wh had infused itself into or was generated in his flesh, wh shifted from place to place, always exciting pain in the part in wh it fixed itself. From this opinion, the method of cure was to discharge the vapour thro' sponges in the part affected. Accordingly many deep

punc-

tures had been made (with exquisite pains) by means of gold & silver needles (wh. two metals alone are admissible). Still the disease continued, but this was owing entirely to the obstinacy of the old or the rapid generation of new vapour. Considering the swelling of the groin as part of the same disease, they hoped to put in their needles there also, but this, the Colas luckily for himself, refused, for fear of hurting some vital part. Here the Drs would have found a strong confirmation of their theory from the wind of the bowels, to the malignity of wh they would have imputed the Patient's death!

Dr. G. felt the pulses of both arms with doctoral gravity, but astonished the Drs & Patient too by explaining the simultaneous stroke of every artery. The Patient was convinced by laying one finger on the temple & the other on the ankle-artery; but the Drs were only embarrassed. He desired Dr G's opinion in writing; gave him a piece of silk, said his ideas were clear & rational but as diff. from those of Asia as if from another Planet.

Surgery is in the lowest state, as they cannot bleed or perform any operation, being ignorant of anatomy which they regard wt. horror. Yet Eunuchs (compleat, commonly called blacks) without much risk. Few die & many walk about after not many days. Some suppose the operation is done by Ligatures dipped in Caustick.

The wretch loses his beard & voice, get a wrinkled, haggard aspect, wh he vainly tries by paint to render comely. He is malignant & vengeful.. They are very numerous, as they alone are permitted to approach the Women's palace..

In sailing up the river Pei-ho they saw 222 compleat pyramids or stacks of salt, containing altogether six hund million pounds. 2000 Junks of 200. tons each were needed to convey this salt needed for one province only. It is prepared from sea-water evapd. by the Sun.. In France during the Gabelle a calculation was made of the qty used by each individual.

ly. It was under 20 lb. allowing this qty & re-
deeming the pyramids broken or unfinished, this
is sufficient for 30 millions. -

The yellow river rises in the mountains of
Tartary 35° N.L. & 19° W.L. It crosses the great wall
twice, & makes a circuit of 2150 miles before
it empties itself into the sea. 70 miles from
the sea it is crossed by a Canal. It is there
a mile broad, 9 or 10 feet deep in the middle
& flows 7 or 8 miles an hour, tho' the country
seems a plain. This shews a great im-
petus at first, or that its course had been
impeded by many narrow precipitous chan-
nels. - Supposing its breadth only 3/4 of a
mile, its mean depth 5 feet, its velocity
4 miles an hour, the water discharged every
hour is equal to 418,176,000 solid feet, or
2,563,000,000 gallons, 1100 as much as that
of the Ganges.

1 3/4 Gallons ale measure, from the mid-
dle of the stream, going 8 miles an hour

were ~~evaporated~~ set by deposited a yellow sediment = to 2½ solid inches. This was a fine yellow Loam, reducible when dry to an impalpable powder. — Martini from the muddiness in the rainy season, judged the earth = to ⅓ of the whole. Some reckon the mud of the nile 1/20 but Shaw evaporating the water found the residuum 1/120. According to the Exp.t the yellow river appears to contain only 1/200th part of mud, but a good deal was unseparated. Even according to this however, a quantity = to 3,420,000,000 solid inch. or, 2000,000 solid feet is carried to the sea every hour. — Suppose the mean depth of the y. sea 20 fathoms (120 f.t) the earth brought by the y. R. if accumulated would raise to the surface an island 1 mile sq. in 70 days. Including Pe-che-lee & Lea-tong, the sq. miles are about 125,000, wh. would be filled up in 8,750,000 days, or 24,000 years. —

Alum stirred about for 3 or 4 minutes, purifies this as well as the water of the Nile

The collection of manure is a great object with the Chinese – Many old & children wth Baskets before them & a wooden shovel in their hand, collect every kind of dung from the roads. What they value chiefly is human excrement which is collected with religious care. Large earthen vessels are sunk to the edge near roads & lanes for the accommodation of Labourers & Passengers, & the retiring houses are so paved that nothing may run off – Strah is thrown on from time to time to prevent evaporation. Even the old & helpless are not reckon'd useless, because they furnish a q^ty of this valuable produce. – This is never used by itself – It is mixed with a q^ty of stiff loamy earth, made into cakes & dried in the sun. This an object of commerce, it is sold to Farmers. Into a large Cistern the put these together with every other offal, & as much water as is necessary for diluting. – This in the act of putrid ferm^n. They mix wth ploughed earth. Seed is steeped in liquid manure, both

vegetation & to repel insects.
On ascending to Tartary many hilly regions some 15000 feet above the plain at the yellow sea. On the top of one rose an inverted pyramid 200 feet high. It was no work of man, nor was it a rock, but indurated clay inclosing gravel in large masses. The soft surrounding parts had been washed down to form the plain, & this remained a monument among the most striking of the changes produced by water! Bones of animals found imbedded in Rocks at Gibraltar & elsewhere, lead to similar conclusions.

In these regions the Goitre is so frequent that every 6th person seemd affected with it. They are mere animals but look on as sacred & treated accordingly. - It seems owing to the air.

The state of physick is so low in China that there are no publick Lectures. The only way is to become apprentice to a Practitioner & to learn as much from him as possible

as many copper coin as = 6d - is the fee among the People & 4 times that for a Mandarin. Most of the rich, keep one in their family & those of the Emperor are Eunuchs. Surgery is so deplorable that amputation in cases of Gangrene or Fracture is unknown.

Midwifery is entirely in the hands of women. Books with proper plates are formed & the practice has many superstitious observances.

Quackery thrives as might be expected, many pretending to prepare nostrums, & one sect, that of Tao-tse, or the followers of Lao-koun, pretending to teach the secret of not dying. Their medc. has been taken by several Grandees & Emperors, & at first gave celerity, but never failed to hasten the event wh. it threatened to ward off.

There is properly no system of anatomy

There are indeed books with figures, but these are consulted more frequently to find out the ept. under wh. each part is placed than to learn its form or structure.

Neither is there any system of natl. history, natl. philosophy or chemistry. There are collections of facts & rules, wh. however seldom go beyond the practice & wants of diffnt. artists.

Inoculation has been practised since the beginning of the 18th Century. It is done thus: A quantity of the rupe matter is collected, dried, powdered & put into a porcelain jar in which shut up it retains its power for years. The patient having been properly dieted & purged a little powder is sprinkled on cotton & put up the nostril on a lucky day.

this mode is more likely to produce complaints of the head, nose & eyes than the common one here. –

Notwithstanding, China is the most healthy country in the world. – Is Surgery & Physic then unnecessary? or how? –

The Chinese have all the metals except Platina. The gold is found chiefly in the sand of rivers; as the mines are seldom opened. – For bells they use a larger proportion of Tin than ordinary, for wh. reason the bells are more sonorous & brittle. – They have whole copper formed into many beautiful utensils. It contains copper, zink, a little silver, sometimes iron & a little Nickel (no arsenick?!) Tutenag is Zink obtained from a very pure ore by calcination. Pelung is formed by heating almost to fusion thin plates of copper, & suspending them over the vapour of Z. When

cool it is brighter & closer than common.
Madeira presents many volcanick ap-
-pearances & Teneriffe still more strik-
ing ones. The top of the peak, which is
2023 english Fathoms perpendicular height,
is covered with lava in masses & burnea
stones or ashes. There is a cavity 80 feet deep
down which was observed a sulphureous
vapour & where a qty of Sulphur was
collected. In many parts the foot can
not support the heat above a minute. Just
under the surface is a soft reddish clay so
hot that the hand introduced must instant-
ly be with drawn wh cont. at intervals for 2 months.
In 1704 an eruption filled up a conve-
-nient port called Garachica on the N.W.
side of the Island & houses now stand
where ships formerly rode.
In the Island of Amsterdam 38'. 42" S.
54' E. long. from Greenwich. It presented every

there volcanick appearances. In a cove elliptical, the circumference of which above was 2 miles & more, were found warm springs in the slanting sides near the water edge. Fast Th. in the open air stood at 62°, in one rose to 196, in another to 204, & in a crevice whence issued a small spring, to 212 - Fish wh. abounded were caught in the bason & boiled in a spring in 15'. - Much burnt & some veins of vitrified matter appeared around.

Dr Gillan remarks that every spot presents proofs of volcanick origin, nay of recent eruption. The heat is every where great; many vapours issue from every crevice; a stone thrown violently causes a hollow noise, & there are many cones, particularly 4 on the W & S.W. sides with craters in their middle. But the great Crater on the Eastern side now full of water, exceeds that of Etna or Vesuvius, or any other known, & exhibits an as-

astonishing view both of the quantity ejected & the force employed. The bottom is 170 feet & the height of the Crater 900 ft. – At night there is an appearance of flame, by day of smoke only.

While the Clarence was in Chu-san harbour, a person on board was seized with violent Cholera morbus. A Chinese Physician being called, asked no questions about the origin or symptoms of the disease, but with great solemnity felt the pulse of the left arm of the Patient, 1st with 4, then wt. 3, then 2 & at last with one only, moving his hand for several minutes back & forwards along the wrist, as if on the keys of a harpsicord as far toward the elbow as the Pulse could be distinguished. He remained the whole time silent with eyes fixed but not upon the

Patient,

by acting as if he considered every distinct disease to be attended with a pulsation peculiar to itself & distinguishable by a discerning Practitioner. –

The Chinese imagine the Magnet to be attracted to the South, because life & action languish or cease as you proceed North-wards. Accordingly they mark the S. pole. –

1799

James Angus was long bed-rid with consumptive complaints, and at last became paralytick. His heart seemd to beat under the right Mammae, & he was very confident in affirming that it was not always so. At last he died.

The left cavity of the Thorax was full of purulent fluid. The Lungs were shrunk & hard adhering to the mediastinum, wh. together with the heart was pushed over in the right division of the Thorax. The right lungs were diseased too but in a less degree.

∴ The inflammation & adhesion here seem to have taken place on the anterior edge of the Lung, & the subsequent effusion pushed the whole adhering mass into the right part of the Thorax.

N.B. Never slight the feelings of a Patient, even when he speaks of improbable.

Aug.t 10th 1799 Mrs Bagaly - a fine young handsome Widow - complaind of pain in the sternum wt cough & dyspnoea - she thinks it hectick, but tis hyteria -
I advised - 1 or two tea-spoonfuls of Pa regorick at bed-time -
2 doses of Columb. gr. V - Rub. Ferri pp.t gr. III Cinnam. gr. I. ℞ daily in conserve or marmalade.
Inhaling Æther ℥I Tinct. Myr. ℥II ℞.
when the cough is trouble-some.
a blister to the part, & an issue wd. veg.le oint.t - if the pain became worse.
Astringent Lotion (oak-barks) for F. A.

Mrs. J. of A. consulted me from the inconveniences of a 1st pregnancy. I advised - 1. Mag. calcd or chalk for 7.
2d. ℞ P. Sal. comp. - Cinnam gr. 11 when necessary - or 2 tea. spoons full of Castor oil - - or Enema
3dly ℞ Aq. M. pip. - Aq. Cin - ā ℥l
Spt L. comp. - Spt. ammon arom ā ℥l M
tinct Coch. p. ex aq. frigor. vento. ung -
4 - Moderate eating & never against the grain -
5thly Gentle exercise - cool bed &c.

1799 A Boy came to the Infy reported to have a stone. He was sounded repeatedly & none felt. After being well alkalized he was dismissed as relieved, or by some thought cured. In a few days Mr B. sounded. at first he felt no stone, but on a 2d trial, pushing the staff thro' a narrow part it touched a stone. He cut him, (from some circumstances the operation was very tedious) & took a stone in diffnt fragments, weighing ℥iii. The nucleus was very hard & the crust also, for wh. reason the sound must have distinguished it readily, if it had struck it. - What prevented it? 1st The stone lay at the very bottom as appeared from the dissected bladder. 2do, along the bottom appeared the mark of

a stone, at least there appeared a round smooth cavity.

2d. The Pr was universally thickend so as to resemble the uterus. This prevented the retention of urine & it might produce a contraction behind the neck strong enough to stop the Staff. – The thickening did not proceed from the operation, because it was equally diffused, & nothing peculiar appeared about the edges cut.

3 Lumbrici were found in the Sterum.

The Boy was said to have died of apoplexy – ! –

1799 Sept. 23d Mrs M'Gudie from Rothsay consulted me for a small opening on the posterior part of the left thigh, communicating with a deep cyst, whence a quantity of sanies flowed. By a cord, a pea & lent attempts to heal it had been made, but in vain. I advised to desist; to cover the orifice wt. simple oint.; to avoid pressure; to bandage; to pour warm sea-water & rub wt. Spt. V. camphor 2ce a day; & to take a gill of sulphureous water 2ce a-day (℞ Sal pot. coch. ℔. solve in Aq. pur. lbl. – If it heal, there will arise another swelling, suppose any part (deep) is diseased.

The Mother is hysterical. I advised pil foetid II. vel III. alvo. adstrict.
℞ Tinct foetid ℥l. T. Val. – Up Lav. c. à ℥III ℞ Sumt Coch. ℔. ex aq. parox. ung. –

1799 Nov.r 7 Miss Ritchie from Greenock cons.d me for scrophulous humours on each side of the neck. I advised

1.st Sal polychrest every morning.

2.d ℥I Murr. ammon dissolved in Aq. Ros ℥VIII for a lotion to the tumours.

3.d Sars. ℥ss. Sassafras ℥III Mezer. ʒI decoct in Aq. lib VIII ad lib IV. Sumt ℥IV h.I & ℥j. h.m.

4. Sea-water if costive.

5 Mattrass. well aired room. Exercise & fresh food.

Glasgow Nov.r 29th 1799 8 o'cl. h. m.

Mr Galbraith died in great agony. He spit blood for several days before his death. He voided it also by stool. His extremities, particularly that opposite to the heart were very œdematous. His pulse was feeble quick & oppressed; he had a constant sense of oppression about the heart, the pulsations of wh. resembled a heaving rather than a distinct stroke. His voice was very much changed for several months, a circumstance wh. together with the feeling about his heart, alarmed me much when other (men of deep learning & dictatorical gravity) thought the whole a whim to wh. indeed the patient was somewt. subject. The prognosis was verified by the event but not illustrated by Dissection, wh. per-

-haps the learned Lecty might not wish for.

Remarks. 1st. The heart was diseased, as well as the contiguous Lungs. Several of the Family have fallen Victim to pulmonary complaints, & all are of a scrophulous fairness.

2dly Several years ago he was bled profusely for Rheumatisms, & lately he was unmercifully salivated by the Edinr. Oracles Bell & Russell - no doubt properly: tho he had no venereal symptom he might have had them: & the probability is however, that perhaps he might have died if he had not been salivated.

3dly He used to take long walks from Edinr. to Craig. Barnet - & walked to study tho' he twice fell down in a kind of Syncope. -

Oct. 20. 1800 John Gray at 16 Had been twice threatened w.th consumption & was now for the 3.d time seized with severe cough & dyspnea w.h he neglected. The sound of his breathing was like that in humid asthma; the countenance was livid; the pulse quick 120 to 140 sharp, but compressible; the skin hot & dry immediately after copious sweats.

He was bled 3.ce always without relief, sometimes w.t detriment; he was blistered all over with no advantage; he got Æther, Opium, Emetics, & expectorants, among w.h was the Inhaler but in vain - He was opend. - In the left Thorax the Lungs were depressed by more than lib 12 of water & the pericard.m contained ℥8. In the right were adhesions universal but watery.

Remarks 1.st As the injuries were great & of old standing, probably nothing would have done good, but the Digitalis should have been tried.

2.dly Wherever lasting dyspnea & cough are unaccompanied by pain - always suspect Hydrothorax!

3.d Where blood shows no buff & ∂ó loss gives no relief, never repeat the Evacuation.

4 Beware of Inflammation & Spasm keeping you from using y.r senses! Nonne hic? —

Gout Cordial from Lord Dundas's Family receipt.

Take 2 Gallons or 9 Bottles of Brandy,
1 Gallon of Malaga or good Mountain,
4 oz of Lemon picked clean,
10 oz of best Turkey Rhubarb, bruised,
4 oz of Juniper Berries bruised,
4 oz of Guiac Shavings,
4 lib of Raisins of the Sun, picked & stoned,
2 oz of lesser Cardamom Seeds bruised,
1 oz Fennel seed do
1 oz Coriander seed do
½ oz Stick Liquorice do
½ oz Saffron do
½ oz Cochineal do

Put all the above in a large stone bottle near a fire, shaking the bottle often, let it stand 10 or 12 days then strain it off: then add to the materials one Gallon more Brandy, & three Bottles of wine which must stand by the fire for a month. Shake it once a day. then strain it & mixing both together bottle the whole.

Glasgow Octr. 4th 1800.

This day opened Col. Houslowne's Abdomen. There was much subcutaneous fat. The Liver was enlarged; hard; white in different places from whence on cutting pus issued out. The stomach adhered to the whole concave surface so firmly that on attempting a separation the fingers went thro' it. In many points the coats were thick & hard; in others, thin & tender. The whole inner surface was red verging to black, & the cavity was filled with clotted grumous blood. The roughness with wh. the part was handled, & its morbid tenderness rendered a more accurate inspection or description impossible.

Remarks. This case was healed in Edinb. as Gout: by brandy, Opium & travelling.

2dly He had vomited blood, but that was imputed to accident: & little regarded.
3dly When I saw him 10 days ago I was struck by the manner of his breathing & the sound of his voice, tho' his look was not so much amiss & I immediately suspected a local affection. Accordingly on examining there was a hardness perceptible & painful over the Cardia, & in other parts of the hypochondria. — I prognosticated accordingly & Mr Dunlop & Whyte concurred. The event shews we were right & is a new proof of the utility of examining parts.
Lastly When has this state begun? Long ago in my opinion — In the beginning perhaps something might have been done — Before we saw him all was over. —

Octr. 10th. 1800 My Friend John Oswald after long ill health was seized with shiverings & hot fits some months ago, wh. Dr. M. healed as an Ague. Before that time he had felt acute pain in the left side, & the difficulty of retaining his urine continued. He got back & went about till a month ago when I saw him for the first time. His looks struck me with horror. His P. naturally 60 was 120: he looked aghast & agonised, presenting an aspect of anguish easy to discern but hard to describe. I put him to bed which moderated his fever a little, but without any essential amendment: the fever continued to return; his urine deposited a quantity of pus & was itself of a dark hue; his strength & flesh melted away, & his countenance became daily

more

more hippocratick. I saw him on the 5th when he seemed easier tho' evidently no better, & hearing he was no worse I did not again see him till the 8th when I saw all was over. – In addition to an increase of all the old symptoms he now vomited a quantity of black matter, preceded by hickup, & by a particular noise as if the stomach had been full of fluid. The evacuation lightened the oppressive sickness for a moment, but it uniformly recurred on drinking a little wh. thirst compelled him to do at all hazards. After much suffering he expired between 7 & 8 in the Evening.

Octr. 12. This day Mr Cooper examined his body which was extremely emaciated.

On removing the muscles the first object that struck was the stomach enormously

dis-

tended in every direction, & occupying a space more than double of the natural one, reaching from the ~~convex~~ concave part of the liver over to the spleen & down below the navel. The intestines were shrivelled universally & in many parts throughout the Ileum were much discoloured presenting an appearance intermediate between inflammation & mortification. ~~The Bladder~~ From the sigmoid flexure to the end of the rectum besides discolouring, there were many small morbid excrescencies at the distance sometimes of one, or of two inches asunder. The Bladder also was discoloured externally, thick & of small size, resembling when felt the womb more than the Bladder. On removing the stomach to examine it more particularly, it was found to adhere to the concave part of the liver by a very great part of its surface, & on separating these

adhesions a quantity of pus flowd from a cavity running up from the left kidney towards the insertion of the psoas internus. The stomach was discoloured in some points, universally thinner than natural, with little appearance of villous coat & filled with a qty (from 3 to 5 english pints) of black matter similar to what he vomited.

The cavity containing pus reached from 3 to 4 inches above the kidney & contained from 4 to 8 oz of pus (not fœtid), communicating with the Teguments covering the kidney. The kidney itself looked white, soft & shriveld. On cutting into it there was no appearance of flesh, every portion ~~being~~ having been changed into a thick white matter like soft butter, & all the cavities which were much enlarged were gorged with fluid pus.

The left kidney was nearly natural, only the pelvis was enlarged, & uncommonly distended with urine.

a Bougie introduced into the Urethra could not be passed into the Bladder on account of a stricture which began near the neck & increased as it approached the prostate, which was hardend so much as almost to shut up the passage. The coats of the bladder universally, but especially near the neck were thickend prodigiously & the interior surface was of a reddish black, & the urine contained in it was of the same hue.

This case occasioned much anxiety to me during its progress & now gives rise to many questions. What was the origin of the disease?

3

Many years ago, having been very agile

he

he leaped several times & felt a pain in his side from wh. he was not free ~~till~~ for a long time. Could that lay the foundation of the suppuration under wh. he ultimately sank? By injuring the part it might precipitate, but it is hardly conceivable how it could do more considering the interval of time & the goodness of his health in many particulars. His colour was good but too florid, each cheek having a red circumscribed circle, & his eye-lids being very red. His appetite too was good especially for breakfast (in winter he ate 3 rolls) but his strength decayed & his sleep was unrefreshing. He never could keep his urine above 2 hours, & he had often disagreeable feelings before, during, or after the

discharge. The Bladder then has been affected for a long time, but it is difficult to say how far that may have been connected with the original affection, or wh. of them was original.

I judged right & prognosticated too truly, but I saw no symptoms of danger till this last attack. The only error consisted in not introducing a Bougie into the Bladder, (for we did into the Urethra) because thus we should have discovered the state of the Prostate, but unfortunately we could not have removed it. Mercury might have been tried, & a regimen (wh. I mentioned indeed) adhered to; for he was injured by some late indulgencies, & by the treatment, e.g. travelling, emeticks, Bark &c.

If the Kidney had been sound till the last journey to Ann's Lodge, the inflammation

wh. then began might have been moderated by proper evacuations, but that time was long past! –

This case is another proof of the necessity of attending to local symptoms, & to the feelings of the patient however bizarre they may appear & however contrary to nosology! – Fancy or Whim or a nosological name is sufficient to check enquiry or exertion in the herd of practitioners, nay they hang a bias on the most candid & add a kind of dead weight by wh. the most active if not stopped are at least retarded in their course! –

June 29th 1801 On the 8th of Feby preceding I was called to visit Mr Adamson a fine young Man of 17 along with Mr Burns. He had had a slight venereal complaint with which he lamped & had lately been under the care of Mr Towers. The prepuce was ulcerated with great swelling over the Glans, & urine flowd from a hole near the frenum. The right groin was covered with a large, ugly, deep ulcer, of most offensive smell, & penetrating below the femoral artery which was seen of a sloughy appearance, throbbing so violently that we could not look on it without horror. Both sores were covered in a most Farrier like Manner with Pledgets of red precipitate which produced extreme irritation & pain; some bark was prescribed which his stomach loathed; he was emaciated, feverish & hectick, expressing the utmost anxiety & misery in every look & tone. We began by removing the irritating dressings, & applied an antiseptick poultice

formed of decoction of Chamomile touching the hairs most slightly & fomented with Tr. Myrrha & opiates & nourishment was given & occasional Laxatives. By this course the sore put on a healing appearance & actually skinned over, but the skin was discoloured, tender to the touch & apt to give way, while an ulcer began to creep along the hairy part of the hu bes very rapid in its progress & of an ugly aspect. Different attempts were made to check its progress or change its nature, all to no purpose: it was sprinkled with bark: he got the same inwardly; mercury was begun & from some appearances of things being worse, it was given up: then bark was again poured in with different dressings when it occurred to me 1st that mercury was needed; 2dly Country air, as he was then in a vile hole in Bell's wynd; 3dly that the Lap. Cal. laid over the surface injured the young skin, for which I washed long. im-

ler to be substituted. at this period we differd in opinion, mine being that the sore was much worse, threatening the body of the penis itself & travelling fast towards the umbilicus, the edges being ragged, thick, with several indentations filled with green fœtid pus, very intolerable & painful even to the contiguous skin wh. was red, & plainly threatend in its turn. All this however appeared to me only; & it convinced me that ☿ was necessary. I began wt corros. sub in very small doses with decoction of Sarsa, & dressed the sores with ung. ☿ nitr. rub. dulc. The progress of the sore was checked; the contiguous skin assumed a natural hue; the discharge diminished; different points healed in succession & the skin over several healed parts looked sounder than formerly. The solution was now changed for the pill ☿ (to wh. however it seems opium is joined) wh. was substituted. He took a pill night & morning but without the slightest salivation; on the contrary his tongue was parched, & he had other symptoms

=toms of fever. There were also occasional bleedings on very slight exertions with a hardness threatening suppuration on the left groin & stretching down to the perineum. Of the slightest touch on those parts he complained much, but some we called it hysterical, childish &c. At last I got him to the country, & every thing about the sore looked well, indeed the surface was nearly closed, only a slight excoriation began again along the upper edge wh had been skinned over, the redness & hardness & tenderness of the left groin increased, while the anxious look, parched T. & every symptom of fever continued. I thought these portended a new suppuration & I prognosticated accordingly. There was also considerable hemorrhage, but that I thought to come from the vessels of the surface, the extent of wh was never mentioned, & I ~~predicted~~ his compleat recovery was expected in a week! — In fact an prognosticon —

One morning June 29th before 9 the woman with whom he resided came breathless to Shawfield crying he was in the sweat of death — Has he hungong? no — Bleeding? no: then he wont die & I will call after breakfasting Mr.

thy line & Craig. - At 10 I found him moribund from mere loss of blood, which had flowed from 3 in the morning, & formerly it now appeared in quantity far greater than I had any idea of. All his dressings being clotted with blood & himself cold I did not dare to remove them lest he might expire as I had no ligatures or instruments I therefore hurried to get Mr Burns, but before we got out the blood had ceased to flow because it had ceased to circulate. The quantity lost was very great, & he expired in a few minutes after our arrival to the mortification of my vanity certainly, & as I think to my regret also on another score.

Next day Mr B. opened the body. It appeared that matter from the right side had dissected the parts along the perinæum & formed a bag reaching across to the left side. The blood came to view from a round hole in this bag near the edge of the pubes, but it had a deeper origin. This too we discovered by throwing water forcibly into the Aorta & a hole was found in the femoral artery between 2 & 3 inches

inches below its passing out of the abdomen. Besides this hole which would have admitted a small white pea, the body of the artery & corresponding vein was plainly diseased - ulcerated Mr B. thinks. No operation therefore could have saved him, & nothing but the more speedy & judicious use of ☞ could in my judgement have prevented this fatal catastrophe.

The case however suggests many remarks moral as well as physical - 1st Never rejoice in the misconduct of a Rival where a fellow creature suffers by it - This may apply in part to me still more to my Colleagues in the first instance with regard to our predecessor, in the next with regard to my anticipated exultation - They differed from me but look at the event said I to myself! 2dly Never neglect or under-rate the feelings of a Patient - How often must I repeat this to myself: Poor A. could not without shrinking bear the slightest touch on the discoloured skin: we like concealed unfeeling Idiots called it Fancy!!!

3dly When a swelling rises near a great blood-vessel with occasional hemorrhage, never neglect it again. If attention to it cannot avert the practice, it may at least direct the prognosis.

Lastly count nothing on one portion of an ulcer healing while another breaks out, while the tenderness around continues unabated & the health unimproved. ! -

While smarting under this disappointment a fresh mortification was added by Mr Scott a Patient of Mr Gardiner's. I saw him on the 8th day of Typhus with a red face, feeble pulse, & flaccid skin, but so moderate that I prognosticated favourably. Next day at 10 he was manifestly worse of which I was aware but not to the extent for he expired within 2 hours, & on my expressing surprize Mr G. taunted me, saying he wondered at my not seeing it in ye forenoon? - What killed him? Was it the Gill of wine given soon after I saw him? I certainly felt his P. at 10 & tho' I have seen so many fevers lately, I committed no mistake equal to this. - Care unremitting & extending to every circumstance is necessary.

R. Inf^ry 1801 Mary Miller Æt 52 very much emaciated had all those affections of the stomach & bowels which are common to dyspepsia, hysteria &c, but a ghastliness of visage & an expression of anguish wh. strongly indicated the fatal derangement of some vital part, especially as the frequent vomiting & incessant pain were not attended with fever. Accordingly on examining the abd^n as I always do, hard humours were felt particularly around & below the umbilicus where slight pressure increased the pain & tendency to vomit. Diff^t opinions were formed as to the nature & seat of the humour; I thought of the Ileum as in the woman at Clay-slap, opened by Mr Cooper, or the omentum as in the case of an Irishman by the same.

The practice was palliative merely, having for object 1st to empty the bowels, & then to mitigate the pain by A. antispasmodics, ex. gr. ol. anis; & opiates, B. by irritating applications outwardly. The stools were repeatedly procured there was but little abatement of the hardness & tension of the pain, from whence it soon appeared the disorder was incurable.

some weeks after leaving the Infy she died. On opening we found the stomach much distended, schirrous tumours having nearly closed the pylorus. To the stomach so distended as nearly to reach the umbilicus, was firmly fixed the omentum adhering to its lower edge like a hard schirrous mass, compressing the arch of the colon over which it lay, & glued also to some folds of the Ileum which lay below. N.B. I was right as to the site of the tumour, for it lay exactly over the folds of the Ileum: but the hard tumour was formed chiefly of omentum.

Besides, the Colon was almost entirely plugged up at two points, viz near the Caput & again above the sigmoid flexure by its bands having become thick & semi-schirrous. The broad ligament of the Liver was similar & the liver itself adhered by several points to the schirrous pylorus.

In every portion of the mesentery & mesocolon enlarged & hard glands occurred in such numbers that hardly one seemed free from disease. No other part was examined. — This disorder probably began long ago, tho till lately it had given little uneasiness, consequently attracted little attention. —

Behold a third anomaly & malfeasance in the course of one fortnight, so that the month of July after an auspicious commencement, proceeds most ominously.

Miss McBrair æt 18 residing at Helensburgh had emansio. mens. before leaving home & got from Mr. Cooper some of the ordinary remedies. She had gone to a damp house & without much previous suffering, indeed without any marked affection of the head, she lost the power of both arms. In this state I saw her with Mr Cooper & Swan. She could move her legs, head & tongue perfectly; the sensibility & heat of her hands & arms were natural, but she could not move them. I suspected hysteria, solution, affect. Mrs. &c. & prognosticated agreeably with some, but little reliance. The Breast was blistered; the belly was spread; foetids were given, & I spoke of blistering the head, but desisted on Mr C's objecting the want of head affections. Swan was at

on the 9th I said there was no material change only the pulse was rather quicker - I again recommended the Blister to the head, which was to have been done when I saw her on the 12th when, behold on the 11th she expired.

Here again I fell into my old mistake of neglecting the feelings & thence to pursue some phantoms conjured up by malevolence, suspicion, or to give it the softest name groundless suspicion. I have not heard the result, but if there was no subsequent attack of apoplexy I think this one of the most anomalous cases I ever witnessed. - Mem: Never treat lightly any symptom usually connected with danger, how remote soever from danger it may be in any particular case.

Moses field Augt 30th 1801 Open the head of Wm. Bannatine Ætat. who had for some years been in a state nearly fatuous.

The head was of moderate size tho' in his infancy it seemed rather large. The Bones were uncommonly thick & hard particularly at the sutures where there seemd a kind of projection, & the women stood up thicker & longer by much than it ought to have been.

Part of the dura mater being torn by the saw, water issued out tinged with blood, & the adhesions between this membrane & the bony covering of the head exceeded in number & firmness any thing commonly met with. Such was their strength near the middle of the longitudinal suture that after the saw had been completely round, & the skull cap separated from its osseous connexion, it could hardly be

be separated.

On dissecting the dura from the ha ma ter, every furrow of the brain was gorged with a jelly like matter, sometimes clear, sometimes tinged, covering not only the sur face but penetrating between the furrows of the Brain. Every part of this space was loaded with water, & wherever blood-ves sels appeared they were distended with black blood.

On cutting the Brain itself its substance was uncommonly hard & besides the distend d blood vessels, some of the cinerious part had a purulent appearance. The Ventricles were loaded with water, & con sequently distended in proportion.

The Cerebellum was nearly natural. The cause of disease & death was un doubtedly the change of the Bones &

as

as a Concomitant ~~to~~ or consequence the change of the brain; but what was the cause of these changes? This I fear is unknown. Could any thing be done by way of prevention? In the case of his Brother Niel every thing was tried by Blisters, Issues, & Setons together wth Mercury & Digitalis; but he is worse than either of his two deceased Brothers was at his time of life, in particular he is much more fretful so that unquestionably the irritation consequent on our practice did more harm than our evacuations did good.. On examining his head I am more & more struck with the prominence of the sutures & the irregularity of the occipital bones in particular.— Could any thing be done by watery diet^n by medicines calculated to diminish the phosphate of Lime, such as alkalis or sulphurets? These last would at least damp the irritable; or by purgatives & Diuretics ? ? ? !!

Jany 1802 Miss Lang a little feeble lively Body had complaints in her stomach & bowels wh led to incessant irregularity as to stools & very freqt vomiting. She had besides that careless look of anguish wh always frightens me & I examined her belly often. The region of the Liver was hard, swelled & impatient of pressure, but nothing very distinct could be felt till a tumour rose over the Epigastrium. Its progress was slow, but at last it began to subside after a copious evacuation of pus by stool. It began again, however, to rise & at last broke, with relief of pain but of no other complaint. Sometimes she ate tolerably, & vomited little, but she gained no strength; had a pulse constantly quick: at last her appetite decay'd, & the vomiting increased till becoming more & more feeble she died.

On opening the abdomen we were struck with the qty of fat under the skin. It was an

inch

morbid adhesions & there were some parts of the Colon very light especially where it passed out from under the Liver.

On raising the Sternum we found a discoloured spot thro' which pus had flowd from the Liver wh. was penetrated thro' by an abscess. The stomach having adhered to its concave surface communicated by 2 holes with the same abscess; but this double discharge could not save from death. – The gall Bladder had several stones in it.

The Lungs adhered by many points to the Sternum which contained some water. The heart was uncommonly white, flaccid, & loaded wt fat. The spine was remarkably crooked.

She had a kind of leprous eruption long ago – any connexion? – When any humour rises slowly, gives no relief after discharging, always suspect a vital part if any be near.

1801 Visited Mr. Muir said he labour under asthma.

I found his face livid; his skin cold; his pulse feeble beyond any thing I ever felt; totally unable to lie down he passed his time in the chair slumbering, & ready every moment to fall into syncope.

It appeared to me no asthma but some disease of the heart tho' I could not make it out as it wanted the pathognomonick signs of angina, aneurism &c. – The scarcity of urine & œdema at last brought it nearer hydrops pericardii than any other, tho the pulse was less irregular & more feeble than is usual even there. – At last the heart ceased its languid efforts, & in my absence at Greenock he was opend by Mr M'Dougal whose words follow.

The lungs adhered to the pleura by very strong bands, but their structure was in other respects healthy. The pericardium was not thick-

ened

: kend & contained ℥1 of dark coloured serum. The heart was enlarged, but neither it nor the large blood-vessels shewd any mechanical derange-: ment. The muscular walls of the heart had a pale flabby look, & tho' thickend somewhat were so friable that they crumbled under the fingers like the substance of the Liver or Spleen. The Aorta & pulmonary arteries were so inelas-: tick that they retained any shape you gave 'em.

There was a disease proceeding from diminished muscularity in the heart & contiguous vessels. The adhesions in the Lungs no Doubt concurred, but the main symptoms are referable to the heart itself. The P. & all the animal actions were weaker than I ever saw them, & he had al most died on the street, for in going to Mr. Balfour's Church he was obliged 3ce to go into a shop. – I was right as to the seat of the disease, but could not make out its nature exactly. –

On Thursday June 2d 1803 John Cloggie Cow feeder Glasgow was bit in the hand by a dog who snapped at him without provocation, biting him so forcibly that the teeth, were four on the back & one on the palm, between the ring & little finger, nearly meet, & the dog did not quit his hold till he was nearly shocked by John's other (left) hand.

As the part could not be cut off without losing two fingers to which the Patient objected, Mr Anderson washed it carefully, then filled the sores to the very bottom with caustick, covered the place with a blister, & made him rub m. & o. strong mercurial oint.t over the neighbouring places. Except 2 or 3 days when he went to the sea, he continued the friction for 21 days, during ten of which his mouth was affected. The Caustick was renewed on the 4th day when the blister was nearly healed; & regularly repeated as often as the former slough separated.

thinking himself safe after the 3d. week he refused to use precautions longer.

A Girl bit the same morning by the same dog was carried to the Infy. & died of hydrophobia in the end of July, by which event the Patient was so little alarmed that he made no application for advice.

On Friday the 19th of Augt. he wrought hard at a hay-stack, afterwards walkd some miles to examine a young Cow, & was considerably fatigued by running to catch her wh. he did by the tail, by wh. he was forcably dragged so as to hurt the right shoulder. Notwithstanding this fatigue he walk'd some miles farther to see a review, where he remaind on foot till 4 or 5 p.m. & on coming home felt unusual lassitude & fatigue. On coming home he went to bed, after drinking some milk which he was somewhat alarmed to find did not thaw so readily as usual, but al-

most choked him. However he said nothing but confined himself all next day, eating or drinking nothing.

Early on Sunday morning on attempting to drink water he was agitated with convulsive sighs till the water was removed. He rose in great agitation, walked about 6 o'clock down to Mr A. & said he was now certainly infected. Mr A tried to reason & ridicule him out of his apprehension, sent him home promising to follow with something that might relieve his distress. Being the alarm he looked pretty stout, but complained of anxiety about the stomach & back. To relieve the stomach & if possible to vary the feelings Mr A. carried with him this Elix ℞ opii pur gr. v
Camphor ʒi M ft pulv.
Ext adde Elect. Gaid. ℥i
P. Tinct. ℥ss Syrup. q.s.
ut ft. Electum
Sumt Coch. haur. o. h. —

The Patient was found in the same distress of mind, with the same hor-

ror of fluids, but was prevailed on to swallow a tea-spoon-ful of the Ely wh he did in the most cautious way beginning to suck it by little & little, after wh he said he was much relieved. He then ate a boiled egg with some mustard & bread, promising soon to take tea & bread his ordinary breakfast. Left him about 8. a. m

On visiting him at noon he had taken some tea, bread, & salt ham, besides 2 more tea-spoons ful of the Ely. He then got some wine & water, goose berries &c all wh he swallowed without horror, tho' with some difficulty, & the difficulty seemd to proceed more from distention of stomach by wind than from any morbid change about the mouth or throat every part of wh within reach of the eye appearing perfectly natural. P. 68 firm & good.

At 10 p. m. he was in bed; hoping to sleep he refused to eat or drink, but tried to

suck some milk thro' an oaten pipe without effect.

Next morning at 6 he was exceedingly weak, & complained of suffocation. He was however prevailed on to take 3 or 4 glasses of white wine & water, an egg, with bread & butter after wh. he became easier & swallowed with less difficulty. Before 12 he had drank 2 or 3 more glasses of wine; had eat some minced collops & found himself so easy that he gave a circumstantial detail of his feelings from the day of the tete tete the present hour. Hitherto I had avoided the subject thro' fear of alarming him; now I led him to it that I might if possible find the cause of his present feelings, for I could learn nothing from the scars which looked sound, without redness or swelling. He felt somewhat itchy over the right arm, but no pain of any sort, nor had he ever felt any except that brought

on by the cows dragging him.

He spoke thus: For 2 or 3 days after being bit I was exceedingly alarmed, but after dipping in the sea, & feeling no bad effect for 10 days I lost all apprehension till the Gul died in the Infy & even then my alarm soon subsided. On Sunday the 14th day before the attack, as I was going to Shelleston Church a large dog suddenly burst thro' a hedge with his tail in his mouth & in other respects of a suspicious appearance, so that I was struck with horror & apprehension. Tho' I received no injury, all that day I continued anxious & uneasy & next night slept none, but next day returning to his usual employment, he forgot his apprehensions & continued apparently well till Friday afternoon when returning home, as already mentioned, he felt the overpowering weakness wh. made me conclude myself gone, but now I have got over it, I have no fears."

This confidence was confirmed & he was
desired to take more wine & food before
Ev.g. At 8 o'clock p.m. a crowd was found
about the door, & in the house, while he was
outrageous seemingly with rage at their intru-
sion. It seems he had been left alone in the
house at 3 o'c. when some persons coming in
told him he was mad & would die unless
he drank vinegar, or wh he made a noise
wh alarmed the neighbours & brought them
to him in order to prevent him from doing
mischief. On turning out the crowd Mr A sat
with him 3 hours, during wh he continued
very furious, raving about being made a spec-
tacle, & giving great proofs of uneasiness. Tho
now & then he talk'd rationally. His pulse
was 108 & instead of being pleased with his
surgeon, blamed him for bringing up peo-
ple to gaze at him, & desired him for
the first time to go away but to return
in the morn.g.

morning. Tho' his present impatience & rage seem imputeable to the intrusion of a crowd, his danger was evidently greatly increased. Next morning however he was more quiet, disposed to eat frequently, imagining he should die of want if he did not, & abusing his Sister for not giving him food often enough. On hearing a question he generally gave a tolerable answer, but immediately began to rave about Cows, hay, milk & other things which commonly occupied his attention. He spit very frequently as indeed he began to do the night before, & occasionally vomited what he swallowed. his P. 144. very feeble.

At 9 he was put to bed, but the impatience of one posture which had appeared from the first, now increased so much as to harass him greatly. He consequently soon left the bed, & about 2 o'clock on Wedy

morng

expired sitting on a chair, without a struggle or any appearance of distortion.

The impatience & irritability were very observable from the beginning, but increased prodigiously since the delirium. A person who came for the Surgeon, threw him into rage because he came without the Surgeon, & his Sister was the subject of incessant scolding because of laziness, dirtiness &c.

I have detailed these symptoms adds Mr A because they do not exactly correspond with those mentioned by Authors. There was no insn of the Cicatrices, no pains shooting thence to the throat, no insn of the fauces, no intolerance of light &c no spitting with noise, & above all no regular convulsive or spasmodick attacks, except sighing & a convulsive kind of swallowing, both limited to the act of swallowing.

The length of time 78 days presents a very awful view of this poison, & it seems to

to enter the system without local secondary action. – This case furnishes another & a very powerful argument for removing the part bit by a suspicious dog even tho' a limb should be lost.

Mr Wm Hutcheson at a little strong built man, of an iron colour, a harsh voice, very energetick, a Cameronian had for a long time complained of uneasiness in the head, often rising to pain & recidily increased by cold or fatigue. Of late he became so much worse that he consulted me when I recommended abstinence, shaving & blistering, with occasional issues. I concluded either that the bones were pressing on the brain or that the vessels were loaded with blood. As his appetite was keen it cost him some effort to restrain it, but the advantage soon experienced encouraged him to persevere. The relief obtained however was very incomplete & followed by no increase of strength, a strong proof of local derangement, & after having been in Edinr. on Sunday the 4th of Sept. 1803 he breakfasted heartily, went to the window where he was struck down

so completely that he could hardly walk to the chair. - From this time he continued apoplectick, having little or no power over the left side, making violent efforts with the right, claiming no relief from evacuations wh were pushed very far & died at six p.m of the following day.

On opening the head we found the Cranium uncommonly thick but unequally in diff parts, particularly at the origin & insertion of the Falx, & over the right orbit where was great roughness & a pointed projection.

The Dura mater adhered to a great part of the parietes not by vessels but by adhesions of a morbid appearance.

The vessels of the brain seemed turgid, & innumerable arteries were dissected for many inches. The Septum lucidum was much thickened & there was a morbid opening

between the ventricles. The plexus choroides was loaded with little things like yellow hydatids, the medullary substance near seemd purulent. But the ventricles themselves were gorged with blood of a fully firm consistence, particularly the right one, in such a state however that no attempt could be made to trace the vessel whence the blood issued.

The pain & susceptibility of injury from cold proceeded partly from the pressure of bones, chiefly from disease in the arteries.

The stroke was produced by the effusion of blood, wh. did not happen till the day before death.

What is the pathognomonick sign of ossified artery?

Account of Mr Hutcheson's dissection by A. Burns.

The dura mater was found of increased vascularity especially in the portion corresponding to the centre of the right parietal bone, & it also adhered with uncommon firmness to the surface of the cranium, particularly along the sutures, corresponding in these two particulars to the condition of this tunic in Children.

The internal surface of the Cranium presented an irregular & rugged appearance especially conspicuous in the situation of the spina frontalis in place of wh. a large tuberosity projected inwards, exerting at least some degree of pressure on the brain, & probably producing some degree of the pain felt there. Some ca brous ridges were also perceptible along the base of the skull, but whether these might or might not be sufficient to derange the action of the brain, they at least serve to point

out. The strong tendency wh. the system should
to deposit phosphat of Lime, whence proceeded
ossification & rupture of a branch from the
arteria media Cerebri. From this blood was found
into the lateral ventricles, chiefly the right.
By this the ventricles were not only distended
but the delicate organization of the brain
was in a great measure broken down. The sep
tum lucidum was torn from its connexion
with the Fornix, & the ventricular cavity so much
enlarged that it extended outward even to the api-
ces of the cineritious indentations backwards,
traversing the posterior lobes of the brain. dissect-
ing & tearing in its course all the parts from
their connexion with each other. A spelly large
coagulum occupied the seat of the pineal
gland which could no where be found. Only
a thin lamella of cortical matter remained
between the blood & falx. On carefully re-
moving all the coagula, the plexus chorui-
des was found enlarged & vescular, an asp
:pearance

appearance however, not unfrequent even in the healthy subject. The surface of the right corpus striatum & thalamus nervi optici, was smeared over with a layer of lymphatick exudation similar to that of inflamed surfaces, & the brain in one or two points shewed evident signs of having been inf.d

The most remarkable morbid change was an universal diffusion of spiffick specks over all the blood-vessels. No such appearance took place in the Carotids till they had emerged from the cavernous sinus, nor in the venous system ~~till~~ after it had assumed the form of sinus, so that the spiffick disposition seemed limited to the vessels imbedded in brain. In many places the spiffication surrounded the vessels completely, destroying their muscularity entirely. –

The right ophthalmick artery was spiffied & for some time before death the P.t complained of imperfection in that eye.

The pituitary gland was uncommonly hard

& in texture apparently almost semi-cartilaginous.

In point of consistence the brain was apparently healthy & the veins coursing along the pia mater did not seem distended.

Father Loomis's Powder against Cancer.

Cinnabar 3i. Ashes of old shoe leather 8 gr.; Dragons Blood 12 gr. Arsenick 6 gr. Powder & ~~th~~ Described by Guy de Chauliac in grande Chirurgie anno 1363 printed 1598. at Tournon

Mr Craig aet 67 short, stout & active tho' occa-
sionally subject to flatulence. Some months ago
began to swallow with difficulty & to vomit
his food, wh. to say the truth came up with
out any effort like vomiting. It seem'd to o-
ver flow spontaneously. No med. produced any
effect. Exercise was tried with no permanent
advantage, but a jaunt to Buxton was attempt-
ed. Not daring to bathe he got home with
difficulty & was thence forward advised to keep
his room & bed. This he did with percep-
tible abatement of the vomiting but no ad-
vantage ultimately. He continued easy ex
cept when he needed to shift pus & on
the 19th Augt. 1804 expired so easily that his
Family thought him falling into profound
sleep.

Two days afterwards he was opend & my
conjecture about the death of his stomach
was confirmed.

The Body was emaciated, yellow & very fatid
tho' in a large well aired room.

The abdominal muscles were shriveled, livid or black - The omentum was of the natural size but without fat - The bowels were livid, or yellow & distended The stomach was 4 times the usual size filling the Epigastric region & stretching from the diaphragm to the umbilicus. Its coats were thin & so unelastick that on cutting it subsided without contracting. It contained a quantity of black fluid like Coffee grounds, was black over several points of its inner surface which was universally covered with gelatinous matter - On rubbing of this, the coat appeared smooth as if the villous coat has been dissolved into this matter. - No appearance of schirrus in any part - Tho' Mr D. expected it -

The right Lung adhered to the ribs behind & before was covered with a coating of coagulable Lymph. In the left cavity was a quantity of white fluid. The substance of both Lungs gave pus when cut. The pericardium contained a qty of red fluid & the heart was whole, soft, & flabby. -

From Edinr. Med. Journal No. 1. 1805.

Dr Spens has given cases of Erythema mercuriale in the Infirmary of Edinr. - Linimentum aq. Calcis & Flour succeeded best as external applications - Opium internally. One died. In 1802 I had a case of this sort in the Infirmary with the nature of wh. I was then unacquainted - Edward Lavenency. Reconsider it. Is the mercury always pure enough?
Chorea was cured in Edinr. by repeated purgatives. The stools were black & very fœtid. Most probably some irritation in the bowels may produce it. The 1st teeth produce Epilepsy, the 2d Chorea. - This shews the folly of referring all spasms to debility & pretending to remove them by Tonics. - My experience confirms this & I have long ago announced this as my opinion.

In Enteritis the costiveness is a secondary object, being the effect only. The cause is inflm. of the membranous part of the Intes.

lines, on removing wh. the other will cease of course, but is irremoveable while the infn. continues. Attempts to remove it prove an additional source of irritation. Remember my own case at Hawkhead – How many perish in this way as I should have infallibly done if I had not bled myself 3ce –

1805 Feby. R. Infy. Glasgow John Thomson Ætat 50 a Shoemaker. Complains of eructation, borborygmi, nausea & incessant vomiting. The Epigastrium is pained especially on pressure, but nothing morbid can be felt in any part of the abdomen. The left Lumbar region is pained with a sense of weight; but exertion produces little change on these feelings, & there is no uneasiness in the course of the Ureter or region of the Bladder. P 110 small & feeble. Skin hot. Thirsty. Bowels very torpid. Rests ill.

Says that for 10 months he has been affected

with nephritick ailments particularly severe about 2 months ago. His chief complaints then were pain & difficulty in voiding urine with frequent desire; tenesmus; inability to void any urine for 4 days together at wh. time the Catheter was attempted to be introduced but in vain. On the eve of the 4th day the urine flowd after a stone about the size of a pea, since wh. time he has had no suppression. The stomach shewd its present irritability only 14 days ago. Urine dark red, with a minute quantity of red sandy particles.

Jany 25 had some aloetick pills. which being vomited instantly produced no effect on the bowels. The two following days Effervescing draughts were given; also 2 doses of Calomel gr. VIII with aromatics but he vomited them. He had copious stools by injections in the Evening. 30th a Blister was applied to the Epigastrium the next day he was ordered a few

grains

grains of opium, & fomentation of the belly without alleviating the vomiting. From Feby 1st to 4 he took a considerable quantity of wine which alone remained on his stomach & for the two last days his urine became more scanty.

On Dissection the abdl. ves. seemed healthy. The right kidney was shrunk, the left much enlarged, with evident traces of chronick inflamn. between its tunic & cortical substance. Its pelvis was distended with a brownish fluid: (not exd.) a light brown porous calculus plugged up the commencement of the ureter; & several minute ones wt. a q.ty of sand appeared in the Infundibulum. Similar matter adhered the the Fundus of the Bladder, in wh. or the contiguous parts there was no marks of disease. – The Brain should have been opend. Baths tried. – N.B. obstinate Vomiting symptomatick often.

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Mr Holder Surgeon about 40 athletick & active began to feel an uneasy sensation in the chest particularly under the Sternum, when he walked fast, but on checking his motion it abated. – Observing it to arise chiefly when he walked soon after meals, & that it was very like the feeling of distention from a large draught of Beer he ascribed it to Flatus & disregarded it. – Tho' very sober & temperate, consequently healthy at the age of 22 he had severe jaundice, after which he was subject to copious secretions of bile, for which he used Cycder with great effect. The attacks in his breast began 1774, & in Jany 1775 were more frequent & so much more severe that they attacked him on horse-back, whence he could bear only a walk. In Feby having been caught in a shower, he was seized wth cough hoarseness & such weakness

as confined him to the house. The pain wh. formerly arose only on exertion was now constant & fixed under the sternum, affecting his respiration so much that the slightest exertion threatend him with suffocation. Going to or rising from bed had the same effect till he got a quiet posture in wh. he slept or sat comfortably. Of late his pain extended farther into the right side & up the neck where he was constantly sensible of a noise like that from a stream of water passing over obstructions, or forcing a passage thro' a narrow confined place: nay when more violent it resembled the dashing of water struck with a pole.

His pulse was hard & contracted, but without intermission, & the pulsation of the heart could not be felt; his extremities were cold & benumbed; & the legs were ~~with so little~~ oedematous.

as he had cough (unusual) he

took away ℥ vi of Blood, with little sign of Buff, but the serum had a bilious tinge, & the loss of it weakened him very much. He also blistered the Sternum & took Liq. am-monaci with oxym Scill.

But he grew worse. The gurgling noise was so loud that he was surprized the Bys-standers did not hear it; the pain also was more severe & obliged him to keep the ho-rizontal posture in wh. he was comparatively easy.

Pressure on the Carotids removed the noise but if long continued or forcibly it increased the pain, which did not cease entirely on removing the pressure. His ap-petite was tolerable but his belly was ra-ther costive. On Feby 21 he tried a hippotony with effect but with a horrid conflict be-tween life & death. Two days after had a most bitter taste followed by bilious vomit-

ing

-ing & purging, so violent that he thought the dis-
ease entirely believed. During this attack his
heart was not at all affected, insomuch that
he felt & walked better than usual. - The Gush-
ing was very strong, now got into the right car,
& the apex of the heart was felt by himself &
wife in the proper place. -

By pil aloet gr V Cal. gr. II he kept his
bowels easy; by Columb. gr. X Sp. aromat gr. III
3.q. hor. he was much relieved passing seve-
ral stools like pitch but not fœtid. - Instead
of remissions by day he now had them by
night. - March 17. he tried Ether for removing
the numbness of his legs & feet, & they were sur-
prizingly benefitted, & every violent attack of pain
in the chest instantly mitigated. The 1st dose, viz
2 tea-spoons, he felt such bursting within as
terrified him, but the ease he felt dispelled his
apprehensions. From this time the pain shifted
affecting the xiphoid Cartilage, & was more con-
stant tho it varied in degree.

as his strength sank the noise lessened, sometimes almost ceasing; at which times he had inexpressible agony & anxiety about the heart: then he had recourse to Æther, wh. invigorating the circulation produced the noise to its usual or a greater degree: whence he said Gush is my Friend; while Gush stands by me I shall live. His face now became sallow & he felt a noise in the left similar to that in the right side but weaker. At times he had dyspnœa wh. obliged him to leave the horizontal for an erect posture.

Drooping apace as his strength declined the noise became less & for the last week it was imperceptible. About this time he felt excruciating pain in his head, & at intervals fell into a state of insensibility for many minutes. During this paroxysm his freq.t & deep sighings seem'd to indicate a degree of suffocation. His P. was small & low; his ex-

: hemities quite cold so that he seemed a-dying; at length after appearing to doze a little he awaked seemingly refreshed, & said he was much better, his pulse actually growing stronger, his countenance more lively, & his extremities of natural temp.re In this way he passed 3 or 4 days & on 31 of March died. Ed. Sp.r

The omentum & Intestines were remarkably loaded with fat, as also the peritoneum, particularly about the umbilical region & the ligamentum suspensorium hepatis. Liver &c natural.

The sternum being cautiously raised, the mediastinum seemed perfectly healthy.

The exterior surface of the pericardium was so loaded with fat that no vestige of membrane appeared. The interior was natural except opposite to the right auricle where for the breadth of a shilling it was beset with firm fleshy granulations about the size of millet seeds. The Liquor was natural.

The heart was longer & more pointed than natural to its size. The right auricle very thin &

enlarged bearing strong marks of inflammation. The ventricle having lost its usual firmness & colour was almost transparent. On opening these cavities a considerable qty of air rushed out, & they seemed as bloodless as if they had been washed clean. The interstices between the chordæ tendineæ were full of air-bubbles like those on the surface of blood received from a vein into a cup. At the upper part of this ventricle from between the columnæ carneæ originated a broad concretion, about the thickness of half a crown, yellow, of very dense consistence, occupying near 2/3 of the capacity of that cavity; rising up into the auricle & thence passing into the vena cava superior for near 4 inches, & into the inferior about 1, of different sizes according to the diam. of these vessels. Another portion entered the pulmonary artery. The branches of these concretions were not so firm as the body, but resembled the lymph of blood received in warm water.

The left ventricle was much loaded wt.

fat & on being slit up longitudinally to the extremity of the auricle was found as bloodless as the right. From the colum. carn: of this there rose a small concretion of a darker colour & more tender consistence than that in the right passing into the Aorta about 1½ inch.

These concretions adhered to the Col. & Carneæ so firmly that they could be sep.d only by Scissors.

The Lungs were natural except on the right side where they adhered to the pleura but in a way which shewd the adhesion to be old.

Aug.t 5. 1806. Mr Hew Snodgrass æt 67 from Newton consulted me for loss of sight - In both eyes wh. have been failing for 5 years I percave a threatening of Cataract. I advised - 1st Shaving once a week - friction with strong camphorated solution - Blisters to each temple alternately. Exhr. Salap ℥ii Tart mur ℥ss - Ol. on. hip g. ℔ss & Dwd in hot ×××. Lunt. 1m bis q. vel 1. tantum. Electricity & Galvanism, if after 2 months this plan should fail.

While Mr R. Scott Artillery Surgeon Woolwich was in the Bahama Islands some people were employed in husking Cascarum - one was blind & on rubbing his eyes felt intolerable pain but recovered his sight - On this hint Capsici ℥ss infs in water ℥i was applied to the eye & sight was restored. - Dr Gerard of Liverpool treated J. Laurence at 34 with this & after much pain & great profusion of tears, cured him. - He was wrecked on the coast of Holland & lived very freely in the W. Indies where his disease first began, & his sight continued. Mem. of med. & Phy Vol IV. 360.

xxx

Sept. 20. 1806 Thos Young Weaver from Carlisle æt 32 had been complaining of stomach ailments since June. He did not describe them very graphically, but his appetite & digestion were impaired & he had a gnawing pain with costiveness. Some time ago he vomited a living worm, & lately 5 others, 3 of wh. he brought to me & left them with me. They seem like the worms of the Caterpillar.

He uses water of a pump-well wh. is covered, the pump being of wood; he has eaten few fresh vegetables except Cresses, & not many of these. – I advised him to keep his belly open with Pil. al. Pil. Rhei com. ā ℈ss Calomel gr. x ℞ Dec in hel xxx – 2 m & v. – & to drink Garlick & Tansy in esp.ts every morning. – How did these worms get into the stomach? how produce disorder there? Mr Coats shewed me a similar worm vomited by a child

but I don't know any particulars of it, & on trying to keep it till it was metamorphosed it escaped.—

March 1807 Janet Grang a fine Girl about 15 came to me with incessant pain of the belly, & frequent, sometimes ineffectual efforts to void urine. Her looks were expressive of great agony. She had been at 3 Drs. before. The 1st gave an Emetick; but it did no good; the 2d. finding the disorder unwilling to come out at the fore door, like Dr. Last thought it best to open the back one by a dose of Hyoscyam; but the disease refused to stir. The 3d. hearing there was a frequent desire to pass urine, ordered a fomentation & an diuretick, but in vain.

The complaint began about 8 weeks ago with every appearance of menstruation

only no blood flowd, & since this period, tho she had been sometimes much worse than at others, she had never been well. On asking if there was any swelling, the Mother replied there was, & on examining, I saw the Hymen imperforated; redder than natural from distention & protruding beyond the nymphæ. On pushing back it yielded, & on introducing a Catheter into the Bladder it appeared to contain very little urine. Next day I opend it with a Lancet when there flowd out 1½ lb of thick high coloured blood, not completely separated, but apparently bereaved of its thinner parts. She felt immediate relief; became a little pale & sick from the sudden removal of tension, & once or twice during the discharge the uterus contracted with much

force

force, expelling the blood with a jerk, as if a portion had come from its own cavity. – The lips of the wound cohered &c but were easily separated, & the orifice was afterwards enlarged. A slight discharge of blood continued for some days, & on introducing a pledget to keep the lips from reuniting, it irritated the os uteri so much as to give rise to motion & produce a discharge of Lymph, a silver Catheter was therefore introduced 2ce every day, & to day April 6th. she is menstruating.

A new proof of the necessity of local examination. – Dilatation produced a state similar to hæmorrhoids, with this difference that the permanent dilatation

of

of the Vagina produced permanent irritation in the Bladder, & rectum. If this distention really took place after 2 menstruations, how could people live for years thus? Monro mentions a case of a widow whose hymen was not opend till her 2d marriage - Then a family!

No practitioner in Glasgow has seen such a case. - Mr Anderson saw a adhesion between the sides of the Vagina produced by Dr Corbet's stuffing in a plug with something astringent on it to stop a flooding. The adhering part became hard like gristle, & so painful that she complained much on its being divided. - I know not the result.

June 29. 1808 Mrs Calder - married - barren - Cet Has long been my Patient for complaints in the stomach & bowels such as attend the worst kinds of hysteria, hypochondriasis & Dyspepsia. She finds no end of describing her complaints wh. without question are very severe. When I saw her first there was a small superficial sore in ye right hypogastric region, below wh. a hard circumscribed tumor was felt. By degrees the tumor stretched over to the left side & upwards towards the Epigastric region increasing in size & in pain. Mercury was tried to no purpose. Different purgatives were used with the effect merely of preventing costiveness; muriate of Lime as a deobstruent & nitrous acid

and from which last more advantage was derived than from any other at least during its use the tumor advanced more slowly. Still however it did advance both in size & hardness. For some days past she was unusually sick & sore, so feeble that she was sometimes faintish, notwithstanding wh. she went out, & that before breakfast as the weather was very warm. The desire of going to stool became so violent that she could scarcely restrain it till she got up stairs, where she had a very copious evacuation altogether peculiar. The matter resembled lard or tallow mixed with yellow matter extremely fœtid, forming a cake pretty solid, uniform & floating on the surface of the fluid below. All her stools since have been of the same kind & they have been pretty numerous.

Mean-time

Mean-time the swelling of the belly has subsided greatly, & the hardness tho' not gone, is incomparably less than formerly especially on the left side & in the Epigastric region. Even on the right side it feels more like the thick side of an empty cyst than like a dense tumor. P. & F. Face &c. seem pretty good, but the pain is still considerable tho she is so querulous that it not easy to ascertain the degree of it. It seems evident that the sack has adhered to some part of the intestines, & that the matter has eroded both. While this passage shall continue open, there may be some chance of recovery, provided the constitution can surmount the discharge. — The matter is not unlike some that I have seen

from

the sacks of ovaria – Is this the part chiefly affected? Was the matter originally fæcal or is that smell imparted to it during its passage thro' the Intestines?
July 1st The stools still continue but of a different colour & consistence. But of 3 one only shewed any of the greasy cake, the two others were fæculent, one thin, the other formed into long white rolls of a moderate size, the other into small white ones of a very particular appearance not unlike Macaroni.
From the quantity exceeding greatly what could be expected from her food I am inclined to think her bowels have not for some time been fully emptied even tho' she sh^d. had apparently free stools, & from the appearance of the fæces some parts of the Intestines have been much compressed.
Her P. continues good, but her counte-
nance

=nance does not improve, & tho' her belly continues to fall in size she complains of pain on the left side & of uneasi-ness about her stomach more than could be wished. The belly is to be supported by a roller; the discharge supported by magnesia wh. usually answers the purpose, & the strength to be kept up by every kind of nourishment she can use.

July 9th. Her stools have continued pretty free & more natural, but she complains excessively & certainly makes no advance toward health. Her pain was such that I gave her a small qty of Laudanum wt aromatics - with relief to the pain but with no other advantage. One stool this morning soft, small, & shewing qs. currants wh. she ate in rice pudding yesterday - From this I conclude 1st that the bowels are heavious; 2d. from the form

of the Fæces they are probably contracted: 3dly from the size of the belly after all the evacuations there must be either a great proportion of the humor solid, or many bags still unbroken: 4thly from the incessant pain I fear there is threatening of inflammation in diff.t points, but she gives such a description as renders it difficult to form an accurate opinion, tracing the pain from one part to another in a bizarre way. Lastly from an attack of fever two days ago, from her total want of appetite & from her ghastly visage it seems most probable that her constitution will sink under the struggle, obtaining merely temporary relief from the discharge above alluded to.

July 16 The Laudanum continues to give relief tho' it seldom procures much sleep. The discharge continues with

a

mixture of feculent matter, but the greater part is glairy of undescribeable variety. This day after an easier night & some sleep towards morning she has discharged a great quantity part of wh. seems to have come from the tumor on the right side because it has begun to fall & a portion of the matter discharged resembles that from the former tumours. The Belly is much fuller, but there is no return of appetite, or strength. Yesterday morning she vomited her breakfast (porridge her greatest favourite) but this the day was able to take some porter - 3 cups - without vomiting. Her pulse is free from fever, but excessively weak, & her countenance looks more & more ghastly. The belly too is still pained over several points but

less

less so than before. – The Laudanum is to be continued with any nourishment & cordials that her stomach can receive.

Sept. 29 No article of nourishment has agreed with her so long as Salep & Oysters, & no cordial so well as Brandy & water: but food yields no nourishment & cordials no relief. Her bowels are always in extremes, & when inclined to costiveness she vomits frequently. For some days she has had a quick pulse, but her tongue continues moist & clean. Her debility increases rapidly with faces hypocratica strongly marked. The Belly is so lank & the adhesions between the humours & bowels so numerous that I apprehend the vomiting may in part proceed from the displacement

ment of the bowels. – NB. She continued lingering till Octr 10th when after more severe struggles than could have been expected she died. – opened by Dr M'Dougal. The uterus was found shorter & fore the hard lump felt on the left of ye pubes. – The ovaria were enormously distended. From one pouch wh stretched above the intestines towards the stomach were taken above ½ a pint of fœtid purulent matter, besides a lump of solid matter containing a quantity of hair (NB Mr C's letter says this carried in at extra by his P– & Tumbler!) There were many other bags, some lying far back, & apparently of recent formation since the evacuation of others by stool. The adhesions were observable & the bowels were deranged & disordered by them. The liver was hard & white: the stomach thin flabby & swollen.

Dr. Wm Duck went out to Prince of Wales Island as 1st Physician to the Force. It is very unhealthy, diseases of the liver & dysenteries being very frequent & fatal. He was 50, of a delicate habit, subject to asthma & severe fits of Catarrh, accompanied with Fever, stitches in the chest & copious expectoration by wh his strength was often greatly reduced.

Soon after his arrival 3 years ago he was attacked with hepatitis & dysentery, & tho' the more violent symptoms were moderated, both continued to undermine the constitution till after 11 months the feet, legs & belly began to swell, wt constant fever & great debility. He left the Island for Bengal & after being on board 53 days, when he arrived at Calcutta, his size was enormous. He could not lay down from suffocation, & by sitting up the limbs were like to mortify, & he

all his old medical Friends advised tap
ping. The common Diuretics & hung alwa
having been tried to no purpose he resolved
to use Calomel more freely than is com
monly done - He took 4 gr. every night for
4 months. During the first 6 weeks little
good effect was observed, only next morng
2 or 3 copious stools were produced by that
loss of faeculent matter, in qty he thought
times greater than all his food: but the
urine was very scanty, thick & high col.
Sk. hot. P. from 120 to 130. The water was
stationary or rather increased - the face
hands, arms & head swelling much, the
voice was lost for a month. - About
the end of 6 weeks the gums were mode
rately affected - 8 or 9 gr. of squills were
then joined daily to the Cal. for 10 days,
but without increase of urine or any other
good effect (he thinks the Squills useless)
however, one day the P. sunk to 44, with sen

shadow" unusual & undescribeable. The squills were given up & the P. rose to 80. The stools became more watery - the ur. increased & in 10 days all the water was gone except a small ly in the Belly - The Cal.ᵗ was cont.ᵈ - 4 months before all the water in the B.Y was absorbed. He was a mere shadow, but recovered gradually & since has been much better than for years before - Indeed he could not wish for better health.

He avoided every thing tending to reduce his strength. His food was nourishing & of easy digestion. Drank beer or wine, of wh. he took as much as he could bear without being heated, & he bore more than usual in ordinary health when a few glasses heat him. He avoided tea, Broths or any thing tending to relax & weaken the Stomach, taking for dinner roast mutton, Veal or Beef, Fowl & Fish. - "My great object he says was to support my strength & by the free use of Cal.ᵗ to remove from the Liver that obstruction wh. was the real disease.

For

For I considered the water merely as a symptom & was indifferent whether it was evacuated or no till the cause was removed. The great error consists in trying by strong purgatives, Diuretics &c. to carry off the water, wh. is seldom accomplished while the Patt. is always much debilitated. But if the water were carried off, no advantage is gained while the cause of the disease remains, because the water will soon collect again. Mercury is the best med. & Cal. the best form of it." Major McGregor of 77th was healed by Dr. Baillie for Dropsy wt every med. & among others with the blue pill for months. He was in the last stage of Anasarca & ascites when he began to take 4 gr. of Cal. & 4 of Squills every night. During 5 weeks no effect was observed but keeping his belly open. Then his mouth became affected; his stools grew more watery & copious while his urine wh. never exceeded half a pint

in 24 hours rose to 9 & 10 pints. omitting the Squills the Cal.l was continued, unless the gums were very sore when it was omitted for a night or two. At the end of 9 weeks he was in such health that he went over to Jersey to be married. tho when he began this course it had required 3 men to lift him into bed. He was only 30. – On the 9th of Jany 1773 began the same plan with one at 60 in the last stage of ascites & anasarca. He had drank hard – his stomach was so irritable that it retained almost nothing. Thirst unquenchable: Sk hot & dry: P. 120 to 130: bowels easily affected & griped from the mildest purgative: pain in his Liver with deep yellow colour. He began 4 g.s of Cal.l & 2 of Squills but he vomited & purged so much that the sq. were omitted & g.n 1 of opium was added, in wh. way he bore it well. Five weeks elapsed without amendment tho his mouth was affected considerably: at last

his

his stools became watery & frequent (4 or 5 daily) his urine wh. before was scanty, thick & red like blood, became clear & increased to 5 or 6 pints - his thirst abated & his appetite increased - P. 80 - No water in the limbs & very little in the Belly - In 10 days he was expected to be well, tho at first the case was reckond hopeless.

No test D'B. thought could be more severe & if it succeeded here he should never despair of the Cal. 3 or 4 gr. given daily for a long time is the proper mode. ! - July 21. 1808.

Novr 11th 1808 - 3 weeks ago Mr Campbell Gardener fell down a stair & was taken up insensible. He was bled once at the arm & twice with Leeches before I saw him. Four days after the accident he had all the symptoms of Inflamed Brain - saw ill - sighed deeply, had a labouring pulse, a loaded tongue & fœtid breath. On examining the head there was a puffy swelling over the lower part of the right parietal & upper part of the temporal bone, which I desired to be opened by a free crucial incision. The parts appeared to have suffered much from contusion & on cleaning the bone a fissure appeared running in a line a little above the top of the ear & losing itself in the temporal bone still covered wt the integuments. By keeping the belly easy & the head raised, after the incision the symptoms abated so far that Mr Gibson judged

judged it unnecessary for me to attend longer. Two days afterwards, however, alarming symptoms again shewed themselves, owing in Mr. G.'s opinion to too much exertion & Mr Anderson saw the Patient. He judged it unnecessary to do any thing. Two days afterwards I was again called along with Mr Cooper. The symptoms of depressed brain were very alarming, & after some demurrage I prevailed to have the trephine applied. A piece about 1 inch in D.n was taken out, a copious discharge of blood took place, the depression was very slight, & no effusion appeared on the dura mater. He bore the operation well, but next day the fever ran very high, & his fate was supposed by some to be decided. Next day however, his pulse fell, his sensibility increased, the appearance around the edges of the sore improved

daily, the burned parts subsiding, the edges putting on a healing appearance & healthy granulations sprouting from the whole of the dura mater. To day every bad symptom is gone only yesterday he complained of pain over the brow. I have again taken my leave - warning him to live low, quietly & taking care to avoid pressure on the part. - The granulations from the d. mater promise soon to unite with the edges of the Incision - Observe if ossification take place. - How did the Trephine operate here? Was the depression tho' apparently slight, sufficient to produce the symptoms? or did the discharge of blood wh. seemed to flow from the intersseous arteries produce that ease wh. became so remarkable immediately after the fever ceased?? -

Nov. 22d. Found him in the Garden directing his Men. Every bad symptom abated or gone. On examining his head the edges of the wound have subsided still farther & the central part is fill'd up nearly to a level with the incision with solid healthy granulations. It is firm enough to bear moderate pressure without pain or any symptom of compressed Brain, but there was no distinct evidence of Osification.

Mrs Prowsly Ct 30 - married 18 months
no Children - Novr 1808 -
Was always young tho' plump & fre-
quently affected with cough or dys-
pnoea - Some months ago coming up
from Greenock in the long coach her
side was much hurt by an Um
brella pressed against it, a circum
stance which she concealed at the time
& since till lately. About the beginning
of this month I was taken to see her
by Mr Young who was afraid of Ovari-
um affection. I found her extremely
feeble, very feverish, with severe diar-
rhoea & frequent vomiting of bile. The
cheeks had something of a hectick hue
& the countenance, voice & every moti-
on indicated the utmost oppression.
On examining the belly I found a very
slight fulness in the right groin, ap-

apparently between the edge of the ca-
pitt coli & the internal edge of the le-
vum, of which on much pressure she com
plained a little; but above in the re
gion of the liver there was a very
perceptible round prominent tumour,
reaching from the cartilages of the ribs
all around, impatient of pressure every
where but particularly below the cart-
ilago ensiformis - I concluded the li-
ver was the principal seat of the dis-
ease tho' there were several specialit-
ies in the case. Her skin & admeata
were perfectly free from tinge; she had
no pain in her shoulder & such
tenderness in the part as seemed to in
dicate an acute rather than a chronick af-
fection". Accordingly a Blister was
laid over the tumour; she got an
opiate to allay irritation & to check diar

chicken, while wine & broth were given as the stomach could bear. No advantage resulted from this plan, & in spite of extreme weakness mercury was tried. After rubbing for a few days only the mouth got affected & the debility increased so rapidly that it was laid aside, very properly by the Surgeon (for my doubts were judged unnecessary in a case so hopeless) & she was D.a. left to her fate.

But about a week ago on shifting her Mrs Hutchison observed a soft tumor on her back in consequence of wh. I was again called. I found 3 soft rounds on the right side opposite to the anterior tumor & nearly equidistant from the spine & the angle of the ribs. The lowest was the most prominent & most sound on pressure.

The sitting erect they appeared separate from each other, on lying down the whole, or at least the highest & lowest, distant 4 or 5 inches, appeared plainly to communicate. My opinion was that a puncture should be made instantly, but as the skin was thick & the case hazardous, it was thought better to poultice for some days. No progress was made for 3 days, nor could any be reasonably expected from the free speed allowed to the matter in other directions, & I requested Dr McD to visit the Patient. He agreed to puncture but I had need of my eloquence to persuade Mrs H. – On the 28 a puncture was made on the lowest tumor, & pus issued of most intolerable fe-

factor to the amount of lbs at least. In proportion as it flowd, every part became more patient of pressure, & the anterior humor diminished so fast as plainly to shew its dependance on the pus. – She was languid of course but easy & had a good night. Still the pulse continues feeble & quick; the mouth sore & no appetite.

30 another good night, tho' her anodyne procured little sleep – Two stools yesterday & last night vomited some bile. – There still seems a fulness in the part formerly prominent, but much less. P. to day excessively feeble, but she can move more freely & she is comparatively easy. The result I shall mark carefully: meantime Remark 1st. On every fac-

future occasion where there is any swelling examine all the contiguous parts. Had this been done, the tumor behind ought have been detected & should have been opend weeks ago. It was detected by mere accident & was not opend till 3 days after!

2dly How does pus become so peculiarly fatid tho' the air be excluded? The fator over powers me, & in two or 3 cases has so nearly destroyd me that I consider it as a modification of that wh. yields the deleterious gas mentiond in L'Andreani's school. I have twice seen it in the Liver, twice in a tumor over the abdomen, once long ago from a tumor in the back, & lately from Mr Mc Adam's check. Is it a peculiar secretion from a surface particularly

morbid? What is the peculiarity? or is it produced by changes resulting from too long delay of the absend poultices? The pus contained now & then a little blood, & instead of being white, had a hue of green, like that from some cancerous sores.

3dly How did this pus operate in destroying the patient? Was it merely by irritation & pain, or was it also in part from absorption? That some was absorbed I am inclined to be lieve from the frequent diarrhoea, & particularly from the urine wh. deposited a very copious sediment of a purulent appearance. In all cases where this pus occurs I have found the irritation & danger incomparably greater than from far greater distentions where the pus was mild.

4thly Ought not an opening to be

made in all cases of extreme irritation without waiting for maturation, or for a thinness of integuments wh. can not happen where the matter is not confined on every side but one? The maxim cocta non cuida expellenda does not apply here. - Premature openings in the tonsils may be more questionable & Mr. H. Waidrop's slow recovery & anomalous symptoms have somewhat staggered me? N.B. Lastly What is the seat of this tumour? I imagine it has begun from an injury among the muscles & has spread among the muscles by destroying their cellular membrane, but I imagine the matter has not yet found access into the cavity either of the chest or abdomen. N. B.

Decr 1. A good night. 2 stools yesterday urine still turbid but less so. All the tumours perceptibly, some of them considerably diminished. P. fuller but still feeble & quick - Countenance oppressed but in a less degree. Dr. med. gave an acid gargle, for wh as the mouth continues sore & aphthous I recommended one wt Borax. There has been a good deal of discharge, much less fœtid - Continue the poultice & nourishment - But the anodyne if she be sleepy, for it has seemed on more than one occasion to repel the sleep that seemed approaching.

Decr 7 Since last report every bad symptom has continued to gain ground. The discharge is great but without relief; purging unrestrainable either by medicines swallowed or in-

jected

=jected; the mouth grows sorer; the coun
tenance more ghastly & the strength di-
minishes. On the 7th she expired. –
I was not present at the opening but
Dr M'D. reported that the disease was
psoas abscess. The bag containing
the pus (wh was intolerably fœtid)
extended along the spine from above
the diaphragm to the iliac region. The
bones seemed free from disease, nor did the
intestines seem pierced by the pus!.

Feby 20. 1809 Opened Mrs Leechman formerly Miss Stewart of the R. Infy. Remarkably well made & plump. Some time ago she thought herself pregnant & that she miscarried. Since she had been more than usually troubled with pain & irregularity of bowels, wh. had long given her uneasiness, but she did not consult Mr Cooper till lately nor me till a few weeks ago. – From the time I saw her she felt corded over all the belly, with general fullness & hardness in particular places especially in the ~~left~~ right side where was felt a prominent painful tumor stretching from the umbilicus to the hypochondrium where it was lost. No laxative could procure

an

an evacuation: all were vomited af-
ter different intervals, as was al-
so every thing she swallowed. Even
injections failed to procure any fæ
discharge while she thought hart
of them also came up by vomit-
ing. Blisters were tried in vain &
the Tobacco Epithem produced mor-
tal sickness. This was indeed seldom ab-
sent accompanied with a sense of
burning, slightly allayd for a mo-
ment by draughts of beer the only
thing she relished. & wh. tho' she vo-
mited it also, she uniformly re-
tained the longest. Her features al-
ways sunk became more ghastly,
she despaired of recovery; her thirst
wh. was long very moderate became
more

more quick & feeble till on the 18th a
bout six p. m. making a very slight
exertion she fainted & in a few
hours, never having become altoge
ther collected, she expired.

On opening the body the subcuta
neous fat appeared surprisingly
thick. All over the belly it was 1
or 2 inches thick of a deep yellow.
The Omentum however was quite
shrunk, discoloured & hard, adher-
ing to the stomach & twisting round
the arch of the colon so as nearly
to obstruct it. All the Intestines
were livid or red, adhering by
many bands to each other & to the
abdominal peritoneum, particu-
larly in the right side where an adhering mass
composed of conglutinated intestines
concealed the ascending colon.

The Colon under this map was quite obstructed. The Ileum just where it enters the Capt Coli was so small that it appeared as long Ligament. Its diameter was nearly obliterated. The stomach was empty, lined with a black ish mucus & the pylorus was quite obstructed by a schirrus. Tho' it adhered to several contiguous parts, no direct communication between it & any bowel tho' the cohering surfaces, could be discovered. – The liver was of a dark blue but seemed natural in size & consistence. – From the pelvis a number of hydatids rose so as to get out of the pelvis. They seemed attached to the Uterus, Ovaria

&

& Bladder, but their attachments were not particularly traced.

These are accounted for all the symptoms except one, viz the vomiting of injections. How could they get to the stomach? not directly, for there were at least 3 impervious obstructions between the stomach & anus. It must have been by absorption & exhalation: but the fact is all ascertained, & tis equally doubtful whether a direct communication did or did not exist between the stomach & intestines. The coiled feel proceeded from adhesions, both of the intestines to each other & to the parietal peritoneum: the vomiting, want of stools &c. manifestly from the obstructions. The only wonder is she lived so long & continued at times so easy. What connexion had the hydatids? Must have been long ill!

Octr. 1809 Some months ago Archd. Taylor Esq my Tenant came to the Infry. He looked very ill, complained of cough, breathlessness & difficulty of swallowing. For many years had been in the habit of drinking spirits daily, whence he had acquired the famous look & sadly sallow complexion inseparable from such habits. Last year his Son was drowned & in trying to save him, he not only got wet, but continued many hours (10) without shifting, since wh his health had been much worse. He coughed much; looked uncommonly

sallow or yellow; had little appetite; great difficulty of swallowing, & was weak & emaciated. Suspecting a disease in the Oesophagus I requested Mr Burns the attending Surgeon to try the probang, wh. failing to introduce he desisted, but the Clerks after several trials succeeded. From that time I introduced it daily. There was generally great resistance at the very beginning of the Oesoph.s accompanied wt profusion of frothy mucus & a sense of suffocation which frequently rendered it necessary to withdraw the inst.t about 4 inches above the Cardia the chief obstruction occurred. It was frequently insurmountable & when

the

The Inhaling raised it gave little re-
-lief. Much pus always & some blood
occasionally followed. The dyspnoea
& debility increased after the deglu-
tition became easier & the Inhaling
was laid aside for the two last
days of his life during wh. he swal-
lowed easily but became worse every
hour & in the morning of the 15th. ex-
pired.

Next day on examining the Body, the
skin seemed much discoloured; the belly
swell'd; the emaciation & feebler ex-
treme. On opening the Thorax the
lungs appeared healthy only some
spots were discoloured some hard:
on removing them together wt. yr. tra-
cea & large vessels, an abscess ap-
peared

appeared occupying about 3 inches of
each Lung. At 1½ inch of the oesoph.
was destroyd there abscesses commu-
nicated freely with each other & with
the oesophagus. They contained partly
pus of ordinary consistence chief-
ly a matter like soft curd, both ex-
tremely fœtid. On slitting open the
oesoph. it was observed to taper
gradually till it ended in the por-
tion communicating with the ab-
scesses, & there it was too strait to
admit the finger. It was here gorged
wt matter. Its coats were thickend,
not indurated. The under end of ye
oes. seem'd healthy as did the Tra-
chea & its large branches.
The heart was very flaccid wt some
lymphatick exudation on its sur-
face. - Liver not much enlarged but
pale. Stomach distended wt Flatus.

Nov.r 18. 1810 Was called at night to
Mrs Law a stout full-blooded Lady
aet 24, in labour at the full time of
her first Child. She had become ill a-
bout 4 a. m, the head presented & she
had regular tho' not very quick pains
during the day. Her bowels were fully
opened before labour commenced.

Between 8 & 9 she had a severe epilep-
tic fit wh. lasted from 5 to 8 minutes,
during which the labour made no pro-
gress.. as the pains began again w.t
apparent regularity, & as she soon a-
gain became sensible Mr Anderson dis-
not call me into the Room, but con-
tinued waiting in the hope of seeing the
labour advance without farther epilep-
tic attack, but in less than an hour

a 2d fit brought me into the Room. It was very severe; continued several minutes & left her stentorious. Every vessel seeming ready to burst I advised copious V.S. & speedy delivery, if it did not advance spontaneously, or if there were the slightest threatening of another fit. 30 ℥ were taken from a large orifice; the pains began again but made little progress, when after about an hour (not quite certain of the interval) a 3d severe fit came on. Before this was over, Dr Thing holding the Patient firmly, Mr Andr applied the forceps very dexterously & brought forth a lusty Boy who with a loud voice demanded what all this meant. Every thing went on well & there was no more Epilepsy.—

This is the 3d case I have heard of
Mrs Dr I Lockhart - delivered by Mr Ha-
milton - she lived.
Mrs King - attended by Wallace, Cooper
& Towers - Died - dont know harhca-
las.
Mrs Caw - living & suckling the child.
Ought any time to be wasted in
washing? Some say yes, I say no.
Bleed immediately - Deliver as soon
as you can.
Does Epilepsy promote delivery?
J. Burns says he has read so in
some books & seen so in some Pati-
ents - several alluded to but always
so generally that A.m grunned at them
as closet Cases.

Does Epilepsy suspend the proper contraction of the uterus? Darwin says it does. Hence Epilepsy does not produce abortion generally. As he says the general convulsions excited by volition to relieve the pains of parturition, continuing to recur without removing the cause, exhaust the sensorial power till death ensue. This happend in 2 patients of whom one was delivered.

He advises V.S. opium? Delivery.

Query. Has the fœtus been often expell'd during an Epileptick paroxysm? Does opium really prove useful? or is this analogical?

How long may one wait with safety?

Novr 1810 Was called to Mrs J. G.! from whom no civility for years!

From fat she became lean, from fair more sallow than a grisette, & her P. constantly quick - She had had two children to the full time beside several miscarr. for 3 months has not menstruated but does not think herself pregnant - Her bowels were irregular but her P. invariably quick 120 when I first saw her. - I did not examine her, but was assured there was no local affection - Small doses of Magnesia & Rhubarb were prescribed - with little effect - but 3 days ago when called again I found the right mamma schirro - cancerous - I urged immediate excision & Novr 28 it was done -

8 p.m. she is very well – but I fear the other Breast may suffer – What ought to be done? in the view of prevention? Low diet? Cusenick? –

1810 Novr was called to see Mr Alex^r Mc
Nab whom I formerly attended for sore
eyes. He had been a firm well-built
active, sober man successful in busi-
ness & extremely popular. His bowels how-
ever were habitually costive & his sto-
mach so sickly that any offensive sight
or smell readily excited vomiting. For
some time Mr Burns had been giving bol-
lus, pungatives & tonics for dyspepsia
under which alone he thought Mr M. la-
boured. Mr Anderson was called by the
Friends & he imagined there was an or-
ganic affection of the pylorus. Allan
Burns & I were called to decide.

I found the Patient much emaciated,
yellow & with that anxious look w^h
betpeaks a fatal attack. He had little ap-
petite; vomited great part of what he took
(from Inanition he took a good deal), &

had irregular bowels. The abdomen was much shrunk, somewhat hard along the omental edge of the stomach, & particularly over the pylorus Mr & I thought there was a hardness: J.B. said there was none, Al. said it was the spinous process of one of the Vertebræ.

After some (rather sullen) discussion it was determined to keep the bowels easy by Mag. & Rhubarb; to stimulate the skin by blisters or Issues; & to strengthen the stomach by chalybeates. The Bowels were reported to be easy; the vomiting was suspended for several days (once for 7) he slept well, also a good deal, was cheerful & inclined to cherish hope, but he gained no flesh or strength or healthful colour. At last

the appetite diminished & the vomiting increased when Dr Hamilton from Edr. came. He is stupid & deaf but got 40 Guineas & recommended in a distant way ℞! It was tried greatly to the satisfaction of the Patient, whose mind declining along with his body led him to hope against hopelessly. His stomach refusing or rejecting every thing Injections of Beef Tea or milk & arrow root were given 3 a day with a laxative injection every 2d day. All the former he retained till he vomited. as also some of the latter. Continuing remarkably free from fever he continued to breathe in extreme emaciation & debility till Feby 6th 1811. I expected to find his stomach much shrunk, also his bowels & I thought there might be a communication be

between the stomach & curve of the colon by wh. the injection was so readily rejected, as I saw in Mr McLinlock long ago, but then every thing passed readily out of his stomach by stool, wh. was not the case with Mr M. –

Febry 7th Opend – Mr B. who said there was no danger in the case was in the country: but came in before the close. The omentum was dark, shrunk & shrivel'd. The greater part of the small intestines was empty, somewhat dark, tho' in various degrees, but the colon was much distended & from the caput to the arch was stuffed up with fecces of various size, colour & consistence. This I cospes surprized me. Before it crossd it run up between the lower & stomach making a fold in a

kind of acute angle; it adhered firmly to the stomach & I thought with a kind of hard ridge along the line, but there was no communication. The stomach was enormously distended, thin, containing from 2 to 4. lib. of black glairy fluids similar to that vomited. The whole inner surface look'd black. The pylorus was schirrous for more than an inch all around, nothing remaining but an orifice so small that on suspending the stomach with the pylorus downward, nothing dropped out; tho a probe could hardly be introduced, so that during life it must have been impervious. — Other parts sound. What became of the injections? were they absorbed? They could hardly reach the stomach thro' the horrid mass that choak'd up the Colon; indeed the small intestines look'd all jejunum, seeming

to have got nothing either from above or below for many a day.

2dly How did the faeces remain so long after so much purging? attend to this carefully.- How could it be discovered? not by the feel; I tried that often - not by the stools - I looked at them often - the patient mentioned it for several days before death but not from any felt inconvenience, merely from wanting a stool, & I refused trying any thing because 1st I felt every thing lank; 2d - he took no articles likely to yield faeces & lastly he complained of great sickness & injury from an injection containing Sulphat of mag.a found wt. muriate of Soda. He thought he vomited it.

Lastly whence came the matter he did vomit? He did not swallow it, nor did it

seem probable for it to come from below: it must therefore have been found into the cavity of the stomach from its own coats. Very singular both from its appearance & quantity.

Lastly How long may this have been a forming? I suppose very long before it was noticed. For many months the stomach may not have been properly emptied. Even the vomiting discharged only the redundant quantity, or that it distended beyond a certain point, all the rest remaining to keep up the irritation wh. produced more.

What could have been done for this in time? What are the diagnostics of this disorder? –

Mr B. has continued to take the same view after dissection that he did during the life of Mr M. It was weakness of stomach increased

almost to paralysis by some Emet. Tart. prescribed by Mr A-n & there was no obstruction at the pylorus wh on his examination he & his Brother found just like other pylori! No wonder Drs should differ about internal complaints when they cannot agree even about what they see such as this or what they feel such as the pulse - I am very often 20 or 30 diff^t from Mr A-. I asked them how much T. Em was given & I find a grain or two only - as vomiting came on & it was not pushed. - N.B. Never try to palliate a mistake by unfair or uncandid statements. Rather submit to misrepresentation than try to counteract it by opposite misrepr^n.

March 7th 1811 Two months ago I was called to Miss Marg^t Dennistoun in consequence of Mrs W's indisposition, for he is the oracle of the Family. The disease was supposed to be a colick brought on 3 weeks before by the eating of Chesnuts. The bowels were fully & repeatedly emptied & all was supposed to be going right, but she did not get on & the pain was occasionally so severe that I was called along wt Dr King.

She was much emaciated, had that anxious look wh never fails to alarm me; her P was quick, feeble & irritated; she had pain in diff^t parts of the abdomen & was irregular in the Bowels. On examining the Belly it was shrunk, had a doughy feel all over; was particularly hard in the anterior part of the right hypochondrium, around the umbilicus but especially in the right hypogastric region.

The first impression I had after considering the previous symptoms & the present appearances, was that the fluid had been intestinal or peritoneal, wh. having not been check'd by V.S. had produced thickening & adhesion both among the folds of the intestines to each other & to the abdominal peritoneum. As the season for making any attempt to relieve by V.S. was long gone by we opend the bowels by diff.t laxatives, applied a Blister to the abd.n & used the effect of opiates after the bowels seemed fully emptied. So much relief seemed procured that after 4 visits I withdrew as my visits were no longer deemed necessary & she was reported better. Not many days afterwards however my attendance was again required & I found no sign of amendment except the absence of a

a Gradually, but many of a contrary aspect. Besides laxatives & a Blister we put her on mercurial friction & Calomel. Her stools varied much but were never natural; her strength diminished & her fever increased apace; she slept much but with little refreshment; hardly a day passed without ~~repeat~~ vomiting; the anxiety of her features increased dreadfully; the region of the liver seemed less tense, & all the abdomen became more patient of pressure, but was exquisitely pained before, during, or after evacuations, wh however we continued to procure every 2d day at farthest.

For some days previous to death she began to vomit a prodigious quantity of yellow fluid, intolerably fœtid & containing many flakes of excrement diffused thro it, with several pieces of solid excrement. She could now take nothing but water & not

much

much even of that; the mercury was given up with every other med.; a mild Clyster was given every night or every 8th hour on the view of mitigating the vomiting, an object in some degree attained. The day before death she became easier, manifestly from the decay of sensibility, & on the morning of the 5th she was the image of death. The skin was flaccid & cold; the features sunk with black expanded nostril; & the P. being imperceptible she complained of nothing but drowsiness. Never did I see the vital flame go out more gradually. I thought it would be extinct before 3 but it continued glimmering till 6 p.m.

This day at 10 we examined the Body wh. was emaciated in the extreme. On diving the abd. parietes, the whole contents seemed one putrid mass, of a dirty yellow colour

from fist wh Dr K. thought fæces from ruptured intestines, the fœtor of wh this exceeded, bespattering the whole & seeming to fill several little cavities, while from other parts hard bands bound the collivies to the abd. parietes. One of these bands near the umbilicus was remarkable both for hardness & breadth.

On cleaning this it was found to be peritoneum or omentum or both complicatly ulcerated & thickened. When cleard away the bowels were seen below without any opening but adhering to each other by innumerable bands. They were nearly empty, a few hard bits of fæces being observable in one part only; seemd very bloodless, but had in several parts a dark hue. There was a hard mass on the right of the umbilicus where I had always felt one, but its nature was not investigated. It no

doubt

doubt consisted of thickening & coloring coats, but the object was to refer every thing to the Liver & Spleen because these had been chiefly insisted on & I was required to chime in. The liver was indeed enlarged & on its anterior edge it was somewhat hard & of a dark colour. As immediately along this line the thickened colon adhered firmly to it I could not help regarding the affection of the liver as secondary & produced or modified by the prior dangerous disorganization of the intestinal tube where I think the disease began, & ended, tho' in its course it drew other parts into participation.

N.B. Danger of names - only a Shotlick -

2 Insufficient practice - V.I. ought to have been assiduous & repeated -

3 Avoid stopping at one thing - Cheerfulness! Gaiety, Candor & Truth - Spleen unchanged - Liver in a 2-day way only - But no! The Intestines once neglected - always kept back!

Could the practice have been improved in my time? I think not. Perhaps some of the purgatives might have been spared as they prod. pain always, sickness often. In fact after all the loose stools we procured enough remained to furnish the horrid vomiting; but no efforts could enable the bowels bound as they were to the abdominal parietes & to each other so to contract as to push their contents the right way. Such motions as did occur must have given in pounds innumerable the feeling of Laceration. What we saw in Mr. McNab, together with the hardness of some & the abundance of other evacuations led us to persevere in a path now beaten – but there was none other open – all led to dust!

R. Infry Novr 1. 1810 Helen McLenachan
aet 20 – a ruddy hale irish Anabaptist.
Had severe pain in her back, head, sto-
mach & belly. Heat moderate. Face flushed
eyes impatient of light. P. 112 small & feeble.
T. dry much loaded, Th. great; B. easy; Ur.
turbid wt copious red ppts; after cold 8
days ago began to shiver & be pained; 5 days
ago took a vomit & next day a purge
with temporary relief. Menstruating now.
After several rigors for wh she got a
cordial & anodyne wt some antimonial,
she began to complain of her stomach,
sides & hypochondrium, & on the 20th began
to vomit not only what she took but
cheaks of blood. Epithems of external & inter-
nal remedies, all of wh were successively
tried, the vomiting continued, the q ly & &
appearance being modified by the food
&

intervals between the attacks, her looks continuing good & her P. natl. till March 6th when it ceased & was succeeded by delirium, quick P. & every mortal symptom — which continued increasing till 17th Died.

Body livid. Vessels of the Brain very turgid more water than natural in the lateral ventricles & at the base of the Brain. — The left lung was inflamed at the lower part & adhered at the back. — Fat of ~~omentum~~ abdomen an inch thick. Much black fluid in the stomach of wh. the inner coat was redder & the rugæ larger. Oesophagus sound. Liver a little enlarged in left lobe only. — Omentum much loaded & stretched to the pelvis. The arch of the Colon had descended half way between the umbilicus & pelvis, containing many hard faces! imperfect — curious case. 1st P. & looks good. 2d. great length of time. 3d. Notwithstanding innumerable purgatives — hard faces still!

Novr 21. 1811 Was called (by Mr B- pro forma as he said) to see Mrs Wood. Four days before she had been delivered of a Daughter. The day before delivery she was very ill with pain in her stomach & faintish ness as she had often been during pregnancy, & her limbs were frequently so sore that she was obliged to lean forward on her knees. The pains next day became regular before 2 & before 4 she was delivered naturally, the placenta coming away spontaneously in 20 minutes. The waters had broken the day before delivery & the abdomen when touched gave the feel of a cross presentation but she would not be examined. As usual with her a considerable haemorrage followed; she was faintish, had a strainess about the throat, & tho' she got 2 gr. of dried opium she had an indifferent night. From

that

that day she became much worse, vomiting
frequently, being sore all over with a P. 130
feeble & irritated - no sleep - & alarming
debility. When I saw her, the vomiting had
become more moderate, but all other symp-
toms continued unabated. - Burns consi-
dered it as pure puerperal fever in wh.
evacuations proved hurtful, nothing do-
ing good but bark - He proposed giving
it by injection as the stomach would not
bear it. As the belly was soft & flaccid
I did not despair, tho' the fever was
dreadful & great appearance of sinking
Countenance anxious & manners flac-
cid. I begd a delay of injections till
E.g & requested a little diluted wine
to be tried with any thing she desired.
Two Glasses were taken with no relish
but without harm & tho' the night she
had 3 Iny.ns of Beef-tea with 1½ tea-spoon
ful of bark in each. This last having
come

away, soon & produced considerable irritation, no more were given. Next day she was no worse. I now resolved to give regular laxative clysters 1 or 2 cc a day & an opiate at bed-time she being more collected & less flushed in consequence of her hair being shaved - the head chafed wt Rum & Camphire & kept cool & the cheek moistened with cold water. This was more necessary from cramp & pains in her extremities & abdominal muscles. Tho' she takes it with reluctance the opiate has agreed. Her pains are less, she sleeps more & wakes with less screaming. To day 25 her pulse is down to 108. Ps she complains chiefly of her tongue wh is excessively sore with some aphtha for wh a Borax gargle was given & the treatment continued. To morrow if things go on as they were doing she will be safe.

Oct. 28 Things have gone on well as I learned
from B. to day for I have not seen her again
The P. is down to 88: the tongue clean & little
remaining but general soreness & debility.
She sleeps without opium & dislikes
injections is to take ol. ric. if any laxa
tive becomes again necessary.
Ought she to have been bled? - Very
doubtful. - Is this pure puerpl. fever? or
is there such a disease independent of
synocha or Typhus, modified by the state
of abdomen peculiar to parturition? In 1783
I wrote a Thesis for Ewry taking the nega
tive side. I have read it over & find it very
well written tho' amid lapsuds from fatigue
dispepsia & sleeplessness. 3 other Theses have
borrowed from it freely tho' generously avoid-
ing all mention of it. - Dr Clark however
has taken a diff.t view, & thinks it sui
generis. - Arguments not conclusive. Peculi
arities - 1st Rapidity - often destroys in 36
hours. 2dly Contagious - ld by Paris, Lon
don - Dublin & Edin.r Hospitals.

3d. Does not bear bleeding like inflammat
affections of the abdominal or uterine viscera
Is this certain? May not the bleeding have
failed from being too late? or too scanty? As
in the spotted fever some years ago! —
4thly The fluid generally effused into the c
vity of the abdomen is diff.t from every o
ther in containing a q.ty of acid. & much c
dy like matter, which sticks on the solids
& when scraped off shews little sign of in
flammation. N.B. Enquire pt into the natur
of this fluid. 2d. how far the fever is pecu
liar. 3d. Whether the affection of the abdomen
precedes the fever or the contrary. 4. The rea
effect of Bleeding.

8½ Feby 8 at 10 p. m. Mr Finnie came
requesting I would visit his Lovely Miss
MacArthur who had long been my Pati-
ent. Her Sister had had Scarlatina & Miss
Mc by attending her caught it 4 days ago.
I found her delirious with a Pulse too much
intermitting to be counted while her Eye
exhibited that dull lurid look wh infalli
bly betokens death. It was too late to use
Scurbs because she could bear no evacuations
her bowels it was said, had been kept easy
& her stools now hap'd off involuntarily
she could swallow nothing. There was a
slight redness on some points of the shoul-
der & breast but in no great quantity & the
heat was not such as to warrant affusion in
any shape. – I desired the head to be shaved
chafed – wine & Bark to be given if possible but
that I doubted & at 8 next morning she ex-
pired. – Ought not V. S. to have been used
here at first? She was flabby – fat – & thorped

hospital almost to fatality. For many years
she took the arsenical solution, because the
asthma uniformly returned on its being o-
mitted - Could this predispose to the fatal e
vent? How? - Tho' I often questioned her I
never could find that it disagreed with
her - I am rather inclined to think her brea
was fatally oppressed by anxiety & watching
her sister & by a severe inflammatory at-
tack not being vigorously checked on the 1st
day
clance. - Enquire & observe the effect of cus-
long continued use of V.S. in Scarlatina.

I lately saw a Boy with compleat Goitre. O-
ther Glands, as appeared in each Groin, were
affected in a similar way & I never recollect
a case of more general glandular disease.
He had lived freshly, how very abound! &
mun of lime. I advised - open bowels - non
nutrive food with acid vegetables - carb.
of S' with carb of Iron - A cure is im
possible but it is worth while to see how
an abatement can be produced -

Last week saw Miss Rowand whose bones
are thinned & whose joints are universally
enlarged, dislocated - in some instances almost
to dislocation, beyond what is commonly
seen - Besides inability to move she can
hardly lye from general soreness & violent
fits of pain - 35th gr. of Laud.m every 2d night
give

give her the only comfort she gets. I desired her to take every night 2 parts of T. Hyoscyam 1 of Tinct Op. to use Corn. Cerv. wet. along with her food, & to take Arsen. Sol. 2ce. a d. Feby 10. No better. has had some gaping & frequent fits of crying. 35 drops of the mur. not moving effected she took 40. I desired her to increase them till they proved effectual & to continue other things.

1812 Feby 18 - saw a remarkable case of pe-
techia sine Febre. Wm Sharp aet 28 & 3 - had a
cold some time ago of which he recovered, but
in recovering had a number of petechiæ, with
no other complaint so far as could be per-
ceived. To day there is a large blotch on
the under lip - one said to be on his throat
but I did not see it - many dark spots
of various sizes - none above the 10th of an
inch in D. over his body - his skin is
of moderate temperature - rather sallow
T. clean - gums sound - nose bleeds often -
3 stools to day - the 1st formd - 2d soft. 3d
loose - with some blood - urine very bloody
is fretful but makes little complaint -
P. 120 - but he cried much on my trying to
feel his P. - Mr Cooper had ordered oranges
Raisins & dilt. Sulphuric ⊼ of wh. how-
ever he had taken little
19 No stool - Ur. still bloody - a restless

less night tho' without any particular complaint – P. 130 – sharp – countenance more oppressed – Eye more languid – Vius acid – capt Sol. ℞ Oxymur pot. gr. XL solve in Aq. ℥IV Sacch. q.s. capt ℥ss o.n. Coath Frenetics –

23 He continued to take the solution with very little perceptible effect, only the urine became less red with a copious black deposit. Yesterday he became languid & slept after a restless night. Many livid vibices appear on different parts with general tendency to oedema. Passt some blood by stool with a quantity of faeces so black & so abundant that 2 qts of Cat. were given. This morning early he had a convulsive attack – At present lying insensible. Pupil dilated. P. not perceptible. Ad.a increased. Pulse [illegible] – In a few hours he died. What is the nature or cause of this complaint? Does it originate in the fluids or solids? [illegible]

some time his P. was said not to be quick
but from the time I saw him it was, tho'
he was lively, playing about, & laughing.
There was however something disagreeable
about his countenance & frequent fits of lan
guor or restlessness. That some cause pre
disposed to general effusion of blood is
evident - What was it? how could it have
existed before, or removed after occurring?
What would have been the effect of bleeding
?

March 13. 1812 one Boyd Æt 28 from Paisley consulted me - He is married has 2 children & is surprizingly well considering the condition of his lungs. 16 years ago during a fever the disease seems to have formed, & tho' it has varied in degree has never since left him entirely. - He is easily fatigued & put out of breath - & occasionally heaves an ill tasted nauseous matter wh. he was told came from his stomach. A sea-voyage, travelling in a coach & the salt water had all been recommended & tried but to no purpose. As he said he heaved every morning & could do it at any time I brought a Bason over wh. after coughing moderately he began to eject lorabs a few at first grey then brown so very offensive that tho' at a distance I was made mortally sick - In a few minutes he brought up ℥iv & the source seemed to be perennial, his daily long appearing to proceed

ceed partly from fatigue partly from his respiration becoming more free? - It is evident that all this matter comes from an empyema in the Lungs - probably from the lowest lobe in the left side - where he had most pain - she has a sense of heaviness & inability to lye on it. In what is this man's constitution that so long a continuance of purulence has not destroyd him? He has no haemopt. no hectick symptom - little cough except when the pus is very abundant & little dyspnoea except when he walks too fast - or up a stair - or exerts too much in another way. In what state is the surface, so as to produce the factor - at all times tainting his breath? or does this proceed from the action of air on the pus? - As he was costive I advised the habitual use of Fl. Sulph - cum Gent - 2d an Issue over the part - 3 Inhaling the Vapor of Æther & Tinct. Myr. NB - ?

March 15 Called to visit Miss Ogle a child who burnt her leg & thigh by overturning a tub of hot water. Rupsel had ordered Vinegar diluted with 5 or 6 water. On looking at the leg I found the scalded surface not very large & looking so well that I did not examine the thigh. The child was staring - somewhat blanch & had a very feeble pulse - She begged I would not tear out her eyes - wh. seemed glazed - On examining I found one hand - both feet & the abdomen deadly cold - & no wonder - for the wet cloth had been for hours applied to both feet, & the sheets soak'd had lain over the abdomen. The sheets also had been hunged - I directed the child to be laid dry - the moisture to be confined to the excoriated part - & the extremities to be brought to general heat - prescribing good. The child had got a powder - of wt sort I know not - I was sent for at 8 but before I came she had died - I have not often been more

sur-

surprized - What caused death here? - I know no thing unless the long & too general application of cold - Enquire at R. -

Decr. 24. 1812 Mr Anderson told me he was called to see a Servant who had for years been subject to Stomach ailments for wh. she took Emetics. She was seized suddenly with violent pain followed by hardness over the whole abdomen & very feeble pulse. Laudanum had been given by the mouth & anus, but he prescribed laxative Glysters of wh. many were given without effect - Calomel by the mouth had as little - at last she vomited all that had been given, but no relief - 30 z of blood were taken with as little & the Glysters of black soap were repeated. She died. On opening, the Stomach was found schirrous near the Cardia & a hole had given way from wh. effusion into the abdn. had taken place. Diagnosis betn. this & Enterocl.

May - 1813 Called to Alex.r Oswald said to labour under Jaundice - He was very yellow, thin & listless. His countenance expressd that anxiety wh I hold to be characteristick of a mortal malady. For some years his stomach had been funny & capricious, but for some months it had gone entirely, except an egg in the morning, nothing relished with him. His bowels had been kept open, he slept tolerably & went out daily in the carriage. By laxatives, stools were procured, but always black; magnesia did not remove a disagreeable feeling from his stomach wh seemed quite dead; bark in various forms did no good & Mrs Watson's drink, recd by Dr Graham, did as little. About 3 weeks before his death he was so exhausted that I discharged him from coming out again. accordingly

he went to bed from wh he never rose again.
On examining him at first, little morbid
could be perceived except a slight tension
in the right hypochondr^m but on renew-
ing the exam^n I perceived a hard ob-
long tumour rising near the edge of
the liver & stretching across the linea al-
ba towards the umbilicus above wh it
was lost. It seemd broad below especi
ally toward the right - was tuberculated
& divided into ridges, or serrated edges,
extremely hard especially on the promi-
nencies, but quite free from pain. It ap
peared certain that this tumour was
the cause of the complaint, as it might
not only obstruct the gall ducts but
disorder both the stomach & the bowels.
As there were no stools. Injections were
given, & one brought off a quantity of
hard faeces after wh the tumour be-
came less perceptible. Encouraged by
this we gave strong purgatives by wh at

at last a number of loose, black very fœtid stools were procured, but without any return of appetite, any increase of appetite, or alleviation of any symptom. Laudm. gave some respite from pain & restlessness but did no essential good; he continued to live till all his Friends looked to death as the only refuge & early in June he expired.

On examining the Body it was exceedingly emaciated & very yellow.

The tumour was the Pancreas exceedingly enlarged into a schirrous mass on the right & fore side wh. had risen into contact with the abd.l parietes. It pushed up the stomach into the left hypochondrium, & it was surrounded by a portion of the Duodenum wh. adhering to it firmly was of very unequal Diameter

bulging

bulging out in one place & contracted in a
other: it pressd also against the liver
so as to obstruct the opening of the Duc-
tus chol. com. - The Intestines were very
unequal - in some parts contracted - in
others enlarged - The liver was livid -
firmer than usual, & adhered by many
strong bands by the whole convexity of
its upper lobe to the concavity of the
Diaphragm. The ~~Gall~~ cystick duct had a con
cretion inclosed in it, in a kind of Cyst,
& the gall-bladder contained a multi-
tude of concretions. - The stomach was
large, flaccid - stoutless - with a slight
hardness around the pylorus. - No fat
in the omentum.
It appears pt. That this disorder
must have been begun long ago - how
long: His colour was always bad, &
his appetite poor - his stools for a long
time black - a swelling around the anus.

2dly What effect would this produce di-
rectly - what indirectly -
3dly Another of my early Friends gone -
a man of great sense & worth - a lover of
liberty - correct in conduct may exemplary
as a husband - a Father & a Friend, but
he call'd Wilberforce a canting Fellow
& since my quarrel with L. Palm. & Mrs. -'s
statement of that quarrel I had no in-
terconrse - My being called now was owi-
ing to Mrs. - In favour with all the Fy -
Lastly What a serious thing is death!
Mr. B. was most successful in bargains, but
here experience & sagacity availed nothing -
He said nothing to me of religion & I believe
little to any body - On assembling his Fy
some weeks before his death the look lean-
ist affection & gravity - saying it was a new
education, but it was the lot of all! This Fu-
neral was the largest ever seen both for
attendants & spectators

July 1st 1813 Lear Dow an elegant tall most
beautiful Gul of 14 who never menstr. was
seized about a month ago with symptoms
of fever imputed to over-growth - on 8th of
June I saw her - She was very ill tho'
without nosological ailment. Her P. was
alarmingly quick & her breathing most la-
borious with considerable cough - & she
had frequent purging - The bowels were
spared - She was blistered on the head &
breast - we had to give Digitalis but
she refused it & it soon became evident
that her disease tho' it could not be ea-
sily named would soon destroy her - a
fortnight ago I thought her on the eve
of expiring, & more than once took my
leave as of certain of seeing her no
more - yet she lived till this morning
at 7 - For several days she ate a great
quantity of fruit & a proportion of other
things such that she had 2 to 5 regular
stools, all natural, some of them formed
&

& very abundant – & very great feminality – Her countenance retained not only its beauty, but vivacity & expression of sentiment till 2 days before death – another peculiarity – on two occasions only was her tongue foul & on one the arch of the palate was whitish but smooth. Tho' she had a rattling sound in breathg. she never complained of dyspn.a nor indeed of any thing except a slight pain over the pronat above the top of the sternum & this was relv.d by a small Blister! On the contrary tho' her P was 140 she said 3 days ago she was better!!! What was this complaint? I imagine a modn. of phthisis – was it connected wt amenorrhea? Could any good have been done by V.S. & cinchonium? In such a case I certainly would try, but I lay by waiting – making much of her & bringing flowers – NB. Beware of prognosticating

Augt 1. 1813 Mary Waddrop æt 10 from Loudoun
Jany 1. 1813 was seized with violent pain of head
wong & cont^d moaning. While awake could not
recline the head from the perpend^r posture with
out great increase of pain & in 4 weeks lost
the power of speech & progression.
Began now to turn round on her feet
w^t great rapidity, always from left to right
Wed^d the live-long day during 4 weeks.
The head-ach w^h had diminished from the
commencement & during the continuance
of the movements, became again violent, &
she rested the head to be hard-press'd, &
at the same time she could not keep her
head erect, or raise it without an assis-
tant: This state lasted 4 weeks.
She then began daily to turn round
like a roller while lying a-bed. at first
the revolutions continued 2 hours, then in
creased to six or from 6 h. in till midnight.
During this movement the arms were oc-
casionally

occasionally kept permanently extended like the spokes of a wheel; the respiration was sometimes very difficult, & she seemed to turn round 12 or 20 times w^th^out inspiration; at other times the body became universally stiff so as to give a temporary check to the movements, but when the stiffness relaxed w^h^ it did in a month, she began naturally to revolve. The revolutions were always from left to right; from 50 to 60 in a minute; & this state lasted 6 weeks.

She then while lying on the back, began to bend her spine so much that her heels nearly touched the head, then falling flat 10 or 12 times in a minute. This lasted at first 5 or 6 hours, but after 4 weeks extended to 14 hours daily.

She next fell into the state w^h^ I saw, beginning at 8 a m & continuing till 1^2^ h. m.

11 h. m.

laying her arms across near her chin she
rules on her head till the feet are nearly per-
pendicular, sometimes close together, gene-
rally at a little distance, the left when I
observed being commonly the lowest, then comes
down again without varying the position
of her arms till the toes reach the bed
& the breech regularly strikes the heels
but with no appearance of convulsion
or even of jerk. This singular motion was
repeated 12 times a minute (720 times an
hour, 11,160 times daily) with astonishing
regularity. On my pinching thighs, she began
to whimper, & while she listened, the mo-
tions were a little suspended, but be-
gan again more quickly. On holding
just one leg then another, she made ef-
forts to get them loose, but the exer-
tions were not greater than might have
been expected from her age, imitated as
she was, & she shewed this by crying
exceedingly. I had her raised by her fa
then

then who forewarned us of wt happen'd.
She tossd about her arms & legs, dis-
torting her face & uttering fiend-like yells.
Fearing the struggle might end in con
vulsion, we laid her down again, when
amid sobbings so violent that they threa
tend suffocation she began the usual mo-
tions, but tho' her arms were readily
adjusted she rose 3 times, each time
advancing a little before her head re
gained that hollow in which the diffi-
culty of rising was least. In rising
the head slid from the brow to the hind-
head, between wh & the arms the weight
was very dexterously divided. - Her fea-
tures were disfigured with rage but
not distorted; her tongue seemd clear,
& her eye so far as I could perceive
it amid contortions was clear, & as I
thought expressive of sentiment. She knew

my

voices again & began to cry on my approach - She takes little drink or food & refuses every kind of meds, consequently has very scanty irregular evacuations. The fit ceases generally at the same time & she rests tolerably till the usual hour when without any assignable cause or apparent preliminary change she begins this singular exercise, wh has now continued 5 or 6 weeks. heat not P could not be felt - it seems small - emaciated. Many have seen her & various opinions are entertained - In former times she would have been thought bewitched. I think 1st She had had an attack on her head - the nature or extent of this, it is difficult to estimate -

2dly The motions began from disease are now continued partly from disease partly from habit - That she has some power over them was evident because while she listened to me they were

sus -

suspended to a certain point, but their continuance shews they are partly produced by disease, for no child like her could without diseased action continue them so long without suffering more than she seems to do –

3dly What motive can influence the will? – suppose it – could the desire of being noticed? very susp.g

4thly How shewness acct for its regular periods?

Lastly – How cured? Tenor – pain – External applications – Submersion – affusion – &c mentd by Mont. NB.

This child went home & recovered gradually – 1st the fits ceased – then she walkd – now she talks.

Extract of a letter from Dr Stewart

In healing Miss Henderson's case the great aim in my opinion ought to be, while you palliate particular symptoms, to cool & brace the constitution; for all my success in healing similar cases, has been in proportion as I gained these 2 points. – With this view I would recommend the following things.

Diet (as heretofore) mild & nourishing, including among other things, Broths particularly Veal broth with rice, Beef Tea Jellies, arrow root with a little Lisbon or sherry wine. – As much exercise as possible without fatigue, both in a swing or a spring chair in the house, & in some carriage out of doors. Might she not go a little to Bute? – and a regular system of sponging the body night & morning with vinegar & cold water ((I part to 3 or so) & following it always with at least half an

an hour's rubbing with the Flesh Brush.
as to medicine I would recommend at present only some good Tincture of Rhubarb. half a table spoon-ful in cold water an hour before dinner & if it do not affect the bowels too much, the same at Bed time every other day for 2 or 3 weeks. a Glass or cup-ful of cold Infusion of Bark with Elix. of vitr. drops (how many?) I forgot) a day for a fortnight at a time. and to procure sleep if necessary, 7, 8 or 9 drops of the Lancaster black Drop at Bed-time — I need hardly add that nothing is to be looked for without vigorous perseverance! —

Henry Lainy & many others were healed by this Gentleman — Thongeng gives some relief, but all are cleared — He is a very great Quack & commits many gross oversights — 1st. He heals an ulcer in the Lung —

on the same principle as one on any other part without making allowance for their peculiarity of structure & of function. This seems incredible but it is the fact - 2dly Instead of proportioning the food & stimuli to the disease he attends only to the debility - Strengthen he uses in the most vulgar sense - 3dly He commits the same mistake as to exercise - Drawing about poor wretches hardly able to sit erect & bringing them in sometimes much worse, sometimes quite dead -

Lastly - Eternal mention is made of his cures tho' none have happened here, but none of his deaths, tho' all here have died. - The credulity of men & loquacity of women are actually unmatchable! - 1814.

June 1814 - Some months ago I was called to Lieut Helvington who had been so long complaining & was so very peculiar that no body minded him. I was much struck by his ghastly visage & on grasping I found his belly tense with perceptible hardness over it especially over the lower part. His feelings were universally uncomfortable; his appetite bad; his excretions unnatural; his pulse rable generally quick; his debility great & rapidly increasing.

I began with aromatick purgatives, by wh. very copious stools were procured, & the tone of the belly was a little reduced, but with little change on the hardness. Next, friction was tried, then Blisters, then mercury, Bark, nitrous acid & opiates. His bowels

continued remarkably regular, but his debility continued to increase, till he was seized with cough, hickup & insensibility, which, after a few hours, ended in death.

On opening the abdn the varicites did not recede as they usually do on a free crural incision. They adhered to the Intestines by innumerable points wh required to be sepd by the finger on the scalpel. On exposing them to view, the Intestines appeared discoloured, in many parts almost livid, adhering to each other at their different circumvolutions & to every part with wh they came into contact. Many many parts were dispersed white bodies from the size of a millet seed to that of a pea, & in the mesentery were found several masses of similar matter from the size of a pigeons to that

of.

of a hen's egg. — But the most remarkable appearance was that of a white mass stretching over all the Intestines, varying in thickness from half an inch to 1½ inch & in hardness from fat to gristle. It was thickest & hardest below the umbilicus towards each flank, & seemed formed altogether from the peritoneum w^h lines the parietes of the abdomen, as no vestiges of it could be found. On cutting into this mass it seemed composed of many cylindrical masses some more some less compressed, similar in structure to those found on the peritoneum of the Intestines & of the mesentery. — They resembled adipose in some respects but no oil was made of them. — Morbid adhesions between the different parts were universal

but no part was minutely examined. What was the nature or cause of this secretion? It was peculiar – It could not be removed after passing to a certain point – Perhaps copious evacuations at a more early period might have done something. – It had no traceable connexion with the omentum wh. was seen with little fat – Uncertain as to this. It must have deranged all the chylopoietic viscera & produced much suffering wh. as usual was ascribed to whim, hypochondriasis, or low spirits, for the young man was charged with all these – He was remarkable for apathy in every respect – He lived alone, sat gazing on the fire the live long day interested about nothing –!

Robert Campbell Esqr. of Shipness - was a very
clever, lively, volatile, sensual young man He
came to consult me for an Epileptick attack
startings in sleep, uneasy feelings on going
to sleep, occasional pains in the head & some
very suspicious sores on the thighs. By shaving
his head, bringing the humours to suppu-
ration, keeping his bowels regular &
opening as I saw he go so much better
that instead of going on to Edinr. as had
been his intention he returned to Shipness -
soon afterwards however his brother a tall
athletick sea-faring man went & dragged him
to Edinr. nothing loath - indeed for he lood ex
citement & adventure. - The wise men of
the East treated him as I had done but
paid no attention to the swellings on
sores. - afterwards he returned to Glas-
gow for the cure of strictures which
he magnified & multiplied exceedingly -
The caustick was frequently applied to
the

the sound was introduced easily. Taking a house in Glasgow for 3 months - for the sake of his children at school & of Mrs C. pregnant & anxious, but for the sake of gossiping & excitement without wh he could not exist he look'd & felt better than he had done for many years. He went to the theatre with his young Family - was frequently on the streets & in spite of a small smoky, noisy house seemd so well that I cease'd to call. It was evident however that something was radically wrong, because he was quite unsettled, & I was led to suppose that partly from the dissolteness of his youth, partly from an action which degraded him in society, chiefly from a fall which during a fit of intoxication pitched him down a flight of steps on his head with such violence that he was taken up for dead, his brain had received a mortal injury.

On Decr 13. 1814 at 5 a m. I was suddenly call'd to him & found him lying insensible

ble after several severe epileptick attacks. The night before he had complained a little of his head, but not enough to attract attention. That night after going to sleep he awak'd uneasy & had recourse to Mrs. C. his usual antidote. & next morn. fell into the fit. Dr Young had bled him before I came. It was repeated without effect. a Blister was applied to the head & sinapisms to the ankles. all in vain the fits continued. the insensibility increased & about 9 ended in death.

30 hours afterwards he was examined. A fissure about 1½ inch long was found in the inner table of the superior anterior part of the os frontis on the right, & a depression of the inner table of the corresponding bone on the left, about an inch in diameter: the external surface in both being of natural appearance.

The Dura Mater was healthy in every part without morbid separations or adhesions.

on removing it, immediately under the fissure a flabbyish humour, like a large bean, adhered firmly to the pia mater, pressing on the Brain into the substance of which it was sunk, deranging its structure so far that several of the fine lobular appearances on the surface were destroyd, whence we imagined that it was in progress extending inwards. Mr. had attacks of Epilepsy 4 hours before death. He had an attack of Epilepsy in Febr. & again in Octr. but the last was the most severe & did not yield to V.S. like the former. 8 years ago he fell down a stair since wh. time he had been subject to violent headaches. – It seems probable that this fall induced the fissure & depression, & tho' he suffered, a morbid effusion, or unknown action had taken place, leading to the formation of that humour wh. seems to have produced Epilepsy & death. NB. Character much modified by organization. Uncommonly well in feelings & appearance immediately before the last attack – very strange but not infrequent – Was the fatal event accelerated by connexion? –

Hugh Lindsay Esq. was my Patient for Mania last season. He was always silly often outrageous & very salacious. The Bones of his head were very irregular as especially behind & I soon predicted that the case being utterly incurable would terminate in Epilepsy, Palsy or Idiotism or all 3. He went to Edinr. & was attended by Mr. Inglis. Epilepsy & palsy came on & he died. Janry 23. 1815 the head was opened by Mr Inglis.

On opening the Dura mater a considerable qty of water issued out, & much lymph was seen diffused within the pia mater extending over the whole surface of the Brain. The ventricles contained more than four ounces, & immediately below them in the basis of the brain there appeared a tumour of irregular shape, nearly the size of a small egg, approaching to the con

consistence of cartilage, of uniform texture & a brown colour. The whole substance of the brain seemd harder than usual.

Such disorganisation the origin of wh. is unknown & its cure impossible, seems to account for all the symptoms of Mr L's complaint. –

Such tumours are probably more freq.t than has been believd. – Arch.d Graham's son & Mr Campbell, tho' the situation be different all agree in this that a morbid tumour existed injuring the Brain by pressure. – disorganisation &c. & prod. palsy or Epilepsy or mental affection. – Is the origin of these tumours referable in any case to a fault in the osseous structure? I strongly suspect this – Quere? –

NB. Elr Maxwell in asylum. –

March 1816 Miss Lemon a poor emaciated
coughing breathless creature from India.
Had a cough with dyspnoea wheezing hurri
ed expectoration evidently proceeding from a
heavy, vomica & tubercles. Her complaints
particularly of her throat & her voice was
nearly gone. – at last she died. – The whole
right lung was tuberculated with frequent
adhesions toward the posterior part. The left
in its upper lobe shewed a frightful vomi
ca of great size with ragged edges, irre
gular surface & great extent. adhesions uni
versal. Tubercles freq.t Pericardium con
tained 35 of fluid. – The Inner surface
of the Trachea was red. The Larynx so
thickened & enlarged that the cavity was
straitened, the ligaments obliterated & the
Epiglottis greatly increased in size, & thick
ness & nearly immoveable. – Hence the wi
zeness about the throat. –

July 20. 1816 This day opened the head of Henry Monteath. For more than a year he had frequent complaints in his head, for wh. Dr H—n bleeded him well & sent him home. He was always listless, pale & languid complaining frequently of his head & taking medicine daily for his bowels, but he went out daily on foot or horse-back — some months ago on feeling his P. I found it 140 feeble & irritated. I put him to bed, bleeded him — gave saline lu-tive & soon found reason to conclude that his head had received a mortal injury part by from ill-formed bones with debility over the fontenelle & hind-head & from a state of chronic Inf.n Leeches & Blisters were applied with some but temporary relief only. The Bowels were frequently & as it appeared completely emptied — morning was given till the mouth was sore — & at last after innumerable most disgusting dis

ulcers were between myself – M – the elder
& the Grumer & Ar the, eneer & a Con
sultation from Baillie & 2 from Hoare, cam
hick was applied to the fontenelle & an
eschar was produced. – The relief was so
lasting that J. M. proposed the Tractaline,
but was over-ruled. The pulse fell to 48
& ranged long between 50 & 72 – During 22
days he took nothing but water & after
having recovered a degree of appetite he
continued 19 days without swallowing
one particle liquid or solid, having been
supported by Beef-Tea injections adm.
3 or 4 times in 24 hours. The mention of
any one article making him whine or
scream with a violent anguitus. Of
course he became emaciated to the ut
most, but his T. continued cleaner & his
Breath less fœtid than could have been
expected. His urine flowed regularly – every
4th or 5th Injection came away so that

for some days before death no laxatives was administered. at last his face became cadaverous. he was more restless & about 3 in the morning he died seeming asleep.

The Eye-lids were open - in hollow orbits with hard circles around. Face extremely sharp & sunk.

The Bones of the Cranium were in some places thinner, in others thicker than was expected: so that they were sawn a sunder with difficulty & in separating them a scalpel was run thro' the substance of the brain. Except strong & numerous adhesions nothing appeared on the surface of the Dura Mr. hence it was fortunate the Trephine was not applied. on removing the Dra the pia Mr was red & loaded with vessels over all the surface & down to the bottom of every sulcus. G.M. indicated there wd be no water in the Ventricles - from the appearance of the convolutions - Rows venous - The substance ~~[illegible]~~ more softness than usual & the colour instead of white was in many points

yellow. More than ℥iv of liquid was found in the Ventricles & red pounts oozed from many parts of the cut brain. – The Base of the skull was still more, more remarkable for inequalities than the upper part. The cerebrum was more deep, the prominences more elevated & sharper than usual, especially in the middle of the orbital bones & the junctions of the hind head, where besides a general scabrous feel there were very sharp projections. – Could the gradual pressure of these rough or sharp projections predispose the Brain to that morbid action wh. ended fatally? This was my opinion during life & it is still more so after death. – Could any thing be done to correct such a predisposition? I fear not. His maternal uncle died mad at Montrose – one paternal uncle died of vomiting of blood, another of cancerous throat & his sister had diseased bones: –

July 1816 Mrs Andrew M'Nair had enlarged
bones on the hand & foot for wh she went
to Dumblaine - Before coming home she visi
ted Perth & on the journey was attacked
with head-ach so violent that she was
confined for some days at Dumblane from
whence she was brought home with
much difficulty & no little pain. Before
I saw her the Bowels had been fully moved
her head was bled & blistered. She conti
nued in great pain, with much tendency
to delirium & no sleep for 3 days & nights.
The Blister was repeated, also the bleed
ing by Mr Smart with so little relief that
on the 2d day she got 30 drops of Laudm & 30 of
T. of Hyoscyamus, after which she slept so
well that things put on a more favour-
able appearance; but this was temporary
for next night all the bad symptoms
returned with increasing debility, very
deep sighs (Mrs Cowper remark'd as
a most unpromising symptom & very
black

black urine with a copious black deposit wh. some were willing to refer to the Bladder, but I referred it to an incurable cause as I never knew one survive it) aggravated pain & intolerable restlessness. as she had much oppression about the precordia & a pulse so weak & quick as hardly to be numbered, cordials were tried cautiously & as they did not disagree, 1 gr. of opium & two of Camphire were given every 3d hour till some effect was produced. — Very soon they began to produce good effects & a 2d appearance cases & amendment, but the P continued quick the T. dry & brown, the urine excessively black & the depression very great. At night the head-ach returned with its usual effects, & next day the 8th of my visiting she could not speak or swallow, & at 3 P.M. she expired. — That this was opposed to an from strong predisposition & the fatal course may is obvious, but was the source of nature of the Blood.

The Black urine? Extremely dangerous. Rupp.

Miss M- D- March 15- after sedulously & incau
tiously attending her Br. who died of purulent
consumption, she began to cough & droop - the
was then tall narrow-chested, high shouldered wt
red hair & very high complexion. Her belly was
rather prominent & her temper peculiar on both
sides of the house. Some months ago I was
called to see her in hooping cough as was sup
posed, I easily admitted the supposition because
it was in the neighbourhood, she never had it
& she vomited freely, eating greedily, but chiefly
such things as her Br. died, & she was quite free
from pneumonick infn. Unfortunately & most im
properly I did not insist on the Family Surgeon
attending partly from resentment, chiefly that I
might not be troubled with cox-ry or stolidity,
but I regret it & will have much reason to
do so. - She never could expectorate without
vomiting & the vomiting left her 5 weeks ago
being succeeded by pain in her bowels & fre
quent stools - many of them very natural.
The fever increased with alarming increase
of every bad symptom, especially frequent
hectick

flushings, more dry cough & more grinding pains thro' the whole abdn wh the prominent & tense sheath no inequality & gave no pain on pressure. The urine became more & more scanty. Opium & Hyoscamus were given with relief to the pain but no other benefit; an Emetic was adm with some relief, & Squills wt antimony; Henbane & Digitalis were given wt a little & but a little advantage. Exercise & change of air were tried without effect, or rather with a bad one. For several weeks she could not recline but sat with her head on her knees like one in hydrothorax. I still clung to hope being blinded by vanity, by vanity, the dread of interference, & the consciousness of incorrectness. Last night I left her with a better pulse, & this morning during a severe fit of cough, much blood was voided & before I got out she was dead. All the sufferings that tried sensibility, unpleasant anticipations & self reproach for repeating what I have often repented of & resolved against, are mine & will long continue

tho' I may judge of the future from the past with no salutary effect on my conduct which is obviously that of a hardened Fool. – Of course I opposed the dissection but being urged & threatened with a Surgeon I did it myself in presence of the 2 Brothers! –

There were slight adhesions on the right side. The left Lung was plugged up with mucus – The Trachea was filled with blood – The pericardium contained 5 or 6 ℥ of fluid. There was none in the Thorax.

The Liver was large & hard. The Intestines stuck to the Parietes & to each other exhibiting dreadful marks of long continued, generally diffused inflammation – There was a great qty of Pieces wh. sprung out on removing the parietes the whole was huddled up – Now was this peritonitis? It is uncertain but at any rate it was coupled with or followed by disorganizations utterly incompatible wt life. – Was the treatment proper? No other

would

have any doubt on this subject & I have many. The bowels should have more atten
tion paid to them in the view if not of a
cure at least a more prudent prognosis.
But the leading error was implicitly believ
ing it for & attending alone. – My anxiety
was little short of agony, my disappoint-
ment is such as no fee can compensate
I feel degraded in my own estimation &
I have whetted the resentment of a young
active mind & against the indefatigable
malice of an old B–d. How little do I
profit even by my own experience!

I have more than once since that
time fallen into a similar snare, mis
led partly by vanity & self conceit, part
ly by the flattery of Patients, chiefly
by my contempt of or hatred to Surgeons
from some of whom I receive daily proof
of enmity or spite & from none any
marks of confidence. My anxiety how-
ever is rather less & my success rather
better – 1818 Feby 24

1818 Feby 24th all are at present agog about discussing mercury in syphilis. I have read Carmichael, Abernethy, Thomson & c. very carefully, have been once at the barracks, twice at the Lock & conversed often with Brown & others. My present conviction is 1st That of sores usually reckoned venereal & consequently treated with mercury 9 out of 10 would get well without it.

2dly Even sores with the character of chancres heal without mercury, & tho' followed by secondary symptoms these disappear after many vacillations without mercury. Tho' frequently their duration is so long & their effects so ~~to~~ ~~tions~~ alarming that it becomes a serious question whether this mode be preferable in any point to a mercurial course properly conducted. I think not: so does Dr B. & he finds the gain in point of time more than a compensation for the risk of mercury. – But is this al

safe.? L. Montgomery was cured in Edin
by a full course after a number of in
efficient ones. Mr Carrick nearly lost
his nose with sarsaparilla by Dr Thom
mo & was cured by mercury & Nitrous
acid tho' with the loss of some teeth
& some bones from the nose & the alve
olar process. N.B. make this an ob-
ject of particular attention not only
now but for several years - if I see the
3dly Some modifications do not acquire
& will not bear mercury. Mrs Thom
case, she died: Mr Witherspoon's he
recovered & the recovery was attributed
to giving up the mercury. N.B. Enquire
4thly I have not hitherto been sufficie
ntly aware of the influence of the
stomach on such sores, & with my usu
al absurdity ascribed the opinions en
tertained on this subject to fancy, ac-
counting for my failures by assuming

ca

caries in the bones & flattering myself on the extent of my success which certainly was not less than that of my neighbours.

Lastly In many instances I have speedily removed by mercury sores that had resisted alteratives. Grocers leg in the Gastrocnemius – Mr. M'N's Family & L. multi I think I am become a little more diligent & docile since the fretfulness of chemistry ceased, but I forget what I read & find I have too long delayed the study for which I was always the best qualified. – How much time have I wasted! – alas! alas! – July 8. 1815. No new information of any kind. The rage for ☿ has changed its direction without impairing the impulse. ☿ B now uses the blue pill in every case not dictatorially or for any definite purpose but for general undefined purposes by repeating pills compiled with the same mawkish stuff N B!

Mr. Mylne a fine florid active man in the prime of life called on me some months ago along with Dr Brown. He was not well but could specify no particular ailment. I was very much alarmed the moment I saw him because I was struck with